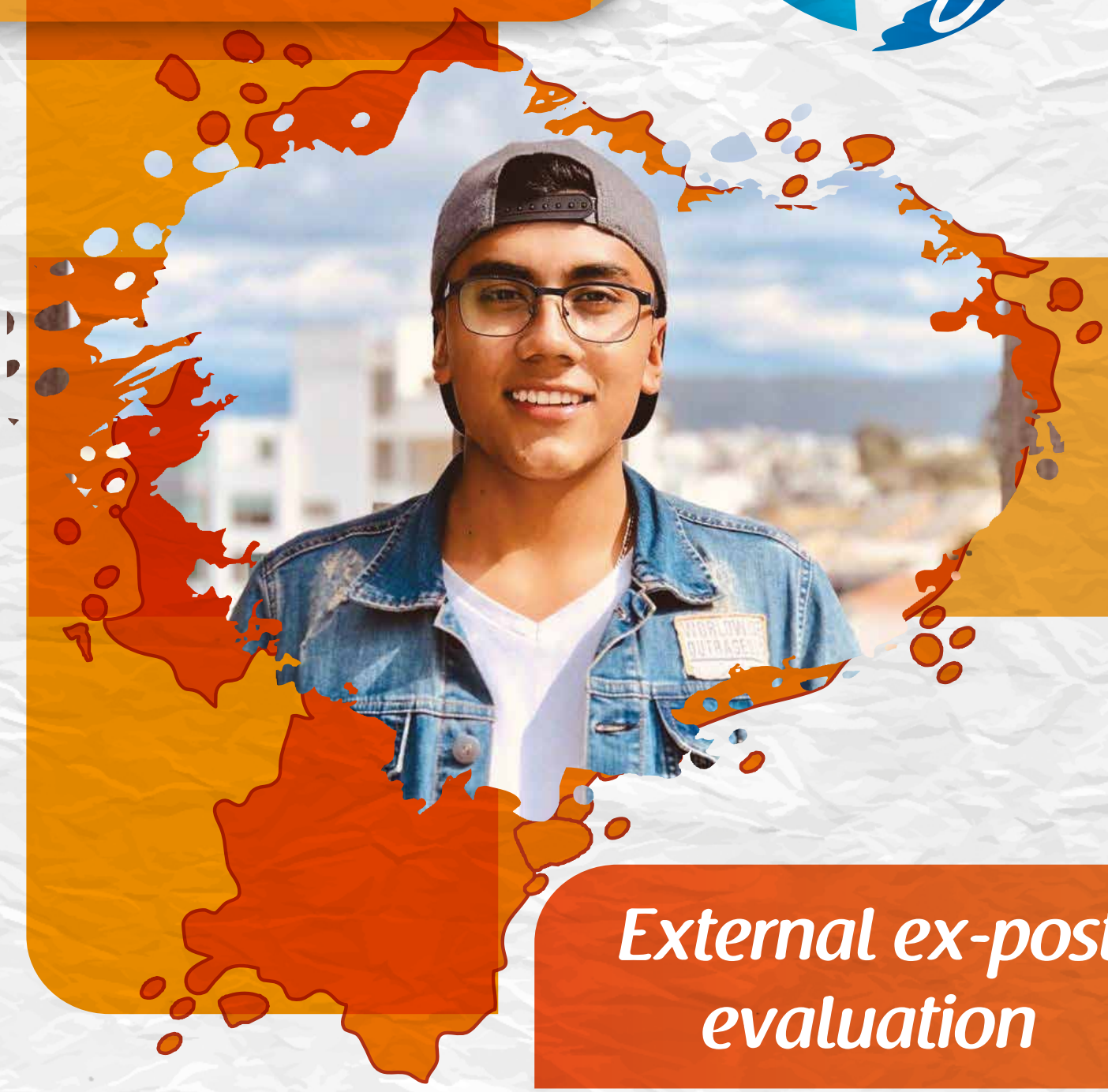
Protection Response for Vulnerable Populations in Ecuador affected by the Humanitarian Crisis

Todxs LOS LUGARES LAS PERSONAS



External ex-post evaluation

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Donación del Gobierno de los Estados Unidos.

CRÉDITOS

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Los puntos de vista expresados en este documento no representan necesariamente los de CARE, Fundación Alas de Colibrí, Diálogo Diverso. Tampoco representan el punto de vista ni opinión de BPRM o del Gobierno de los Estados Unidos.

Este documento abarca las actividades de ayuda humanitaria llevadas a cabo con la asistencia financiera del Gobierno de los Estados Unidos.

Noviembre del 2020

Todxs LOS LUGARES LAS PERSONAS

External ex-post evaluation of the "Multi-sectoral Protection Response for Vulnerable Populations in Ecuador affected by the Humanitarian Crisis" Project executed by CARE, Alas de Colibrí Foundation and Diálogo Diverso between 2019 and 2020

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ACRONYMS

ACF: Alas de Colibrí Foundation

AME: Municipalities of Ecuador Association

CARE: CARE International in Ecuador

CCDMH: Advisory Council on Human Mobility

CCPD: Cantonal Council for Rights Protection

CIDH: Inter-American Commission on Human Rights

DD: Diálogo Diverso

ENIPLA: Inter-sectoral Strategy for the Prevention of Adolescent Pregnancy and Family Planning

GAD: Decentralized Autonomous Government

GTRM: Coordination Platform for Refugees & Migrants from Venezuela

ITS: Sexually Transmitted Infections

ODS: Sustainable Development Goals

PRM: Bureau of Population, Refugees, and Migration

MIES: Ministry of Economic and Social Inclusion

SIMIEC: Ecuadorian Migratory System

SNS: National Health System

SSR: Sexual and Reproductive Health

SR: Reproductive Health

VBG: Gender-Based Violence

VVS: Sexual Violence Survivors

1. INTRODUCTION

Since 2016, around 5.49 million Venezuelan citizens have settled abroad due to the social, political and economic crisis faced in their country. According to data from Ecuador's' Ministry of Government, 165,761 Venezuelan citizens filled the country's migratory registry, of which 77% entered Ecuador before July 26, 2019. According to the Ecuadorian Migration System, up until the end of August 2020 350,510 Venezuelan citizens had entered the country, not including people who entered through irregular borders.

To respond to the migration crisis CARE Ecuador (CARE), Diálogo Diverso (DD) and Alas de Colibrí Fundation (ACF) associated to implement, with funding from the Bureau of Population, Refugees, and Migration (PRM) of the U.S. Department of State (that finances assistance actions for vulnerable refugee and migrant populations around the world), the ***"Multi-sectoral Protection Response for Vulnerable Populations in Ecuador affected by the Humanitarian Crisis"*** Project (PRM Project), from September 1, 2019 through August 31, 2020. The Project aimed at improving

health and physical and psychological well-being of the forced-to-migrate Venezuelan population (and other nationalities), both migrants and refugees; as well as of the vulnerable local population, particularly LGBTIQ+ individuals and women survivors of gender-based violence, through a multi-sectoral intervention that includes: health care, legal and psychosocial advice, shelter, and comprehensive support interventions for the migrant humanitarian crisis. The project also generated advocacy actions to strengthen the capacities of public officials and institutions related to migratory processes, and to promote the restitution of migrants and refugees' rights.

The CARE-ACF-DD consortium gathered concepts from each organization's own experience: ACF's human rights-focused protection actions for victims of trafficking; CARE's protection and assistance strategies for women survivors of gender violence and for the migrant population; and DD's tactics of empowerment, advocacy and visibility of gender-diverse people.

The Project was implemented in various places of Ecuador by the three organization, as follows:

- CARE: Quito, Manta and Huaquillas; Ibarra from April 2020, due to the COVID-19 crisis.
- DD: Quito, Manta and Guayaquil.
- ACF: Tulcán, Quito and Lago Agrio.

The total number of people served by the PRM Project was ***24,955.***

17,638 *Venezuelans and other nationalities*

7317 *Ecuadorians*

Alas de Colibrí
FUNDACIÓN
Tulcán
Ibarra
Lago Agrio
Quito
Manta
Guayaquil
Huaquillas
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The project applied the following **cross-cutting approaches**:

1.- ***Human Mobility Approach:*** Aims at protecting the forced-to-migrate populations, both migrant and refugee, in the face of the Venezuelan migratory crisis.
2.- ***Gender Approach:*** Supports the empowerment and resilience of women and LGBTIQ+ individuals, and protection mechanisms against gender-based violence and human trafficking.
3.- ***Human Rights Approach:*** Aims at closing gaps to promote people's exercise of rights, particularly of migrant populations and vulnerable host communities.

1.1 Project beneficiaries

PRM Project's **assisted population**, for whom the project aimed to achieve changes and transformations, was made up of the refugee and migrant population from Venezuela, people seeking asylum, those with an irregular migratory status, and vulnerable populations for whom the temporary protection and international protection legal frameworks of Ecuador apply. These are forced-to-migrate populations due to violence, whom cannot access food, health, education, transportation or resources to meet their basic needs, as well as highly vulnerable people from host communities. The **target population**, comprised of people, groups and organizations with whom activities were implemented to achieve the expected changes in the assisted population, and for whom the Project identified advocacy opportunities, consisted mainly of public officials of protection services and of national and local authorities from Ecuador.

1.2 Project external risks

The CARE-ACF-DD led PRM Project faced three adverse external events during its execution: the visa requirement for Venezuelan citizens imposed as of August 26, 2019, which caused migration flows to peak during the previous and following weeks; government imposed economic austerity measures, which led to demonstrations that paralyzed the country from October 2 to 13, 2019; and the declaration of state of health emergency due to COVID-19, from March 11 to September 15, 2020, and the state of exception from March 13 to September 11, 2020. Faced with all these happenings, the three organizations took contingency measures to continue carrying out the Project activities.

1.3 PRM Project Components

1.3.1 Protection, strengthening and advocacy

The goal of this component was to strengthen individual and institutional capacities to respond to the protection challenges generated by the Venezuelan humanitarian crisis. To this end, the Project provided technical assistance, training and awareness raising to personnel and authorities so that they recognize and respond to protection incidents and concerns. At the same time, this component provided psychosocial and legal support services, referring the assisted population that reported protection violations to specialized care services; and promoted local and national advocacy on migration regularization mechanisms, and against human trafficking and gender-based violence.

1.3.2 Comprehensive health care

Its goal was to improve access to health services for the assisted population, including drugs, specialized laboratory tests, and primary medical attention complementary to the public health system. Sexual and reproductive health care were key for this objective, particularly for people living with HIV and women survivors of GBV, through prenatal checkups and ultrasounds, STI screenings, HIV testing, laboratory tests, delivery of medicines and medical supplies, and accompaniment for case referral to the institutions in charge. Additionally, the component was backed by education and training processes on sexual and reproductive health, sex-gender diversity, emotional health, resilience, conflict resolution, peace education and non-violence, coexistence, and gender identity.

1.3.3 Shelter and accommodation

Its objective was improve and / or increase access to temporary shelters and safe spaces for the protection of refugees, asylum seekers, Venezuelan migrants, and Ecuadorians in vulnerable situations, particularly LGBTIQ+ individuals and women survivors of sexual violence. The project provided the shelters with furniture, equipment and materials, and trained their staff on humanitarian standards. Another important component of this objective was the delivery of assistance vouchers to the affected population, for temporary accommodation in selected hotels or hostels. In some cases (especially for families), rental payment of places chose by the beneficiaries was made, with the validation of the technical team of the organizations.

1.3.4 Humanitarian assistance

This component was created in response to the COVID-19 health emergency, and aimed at responding through mechanisms that contributed to preventing COVID-19 spread through the delivery of hygiene kits (which included masks, alcohol and chlorine - among other items), and multipurpose cash transfers to cover urgent needs such as food, rental/accommodation, hygiene supplies, transportation, among others.

Considering the care needs of the forced-to-migrate population (much of it in transit from Ecuador to the northern border), delivery of this component was expanded to the city of Ibarra - Imbabura, which is a main transit point for the Venezuelan population.

1.4 PRM Project Beneficiaries

According to CARE's monitoring & evaluation system (alongside ACF and DD), the total number of PRM Project beneficiaries was **24.955 people**. Below, data of Project beneficiaries disaggregated by territory, gender, nationality, locality of attention, and component is presented.

> NOTE: *Preliminary data of the project's scope as of August 2020. After the consolidation of all data from the three organizations, particularly of the last collective activities carried out, the figures will increase partially, without affecting the analysis and the considerations made in this document. The final data will be shown in the final Project report.*

Table 1: Beneficiaries by territory and gender

Territory	Male	Female	LGBTIQ+	TOTAL
Huaquillas	1908	2952	34	4894 (20%)
Manta	2492	3482	9	5983 (24%)
Quito	2797	4013	76	6886 (27%)
Ibarra	311	340	11	662 (3%)
Lago Agrio	642	1286	2	1930 (8%)
Tulcán	767	1215	12	1994 (8%)
Guayaquil	1318	1254	34	2606 (10%)
Total beneficiaries	**10235**	**14542**	**178**	**24955**

Source: *PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary)*

Table 2: *Beneficiaries by nationality in each assisted locality*

Locality	Venezuelan + Other	Ecuadorian	TOTAL
Huaquillas	3874	1020	4894
Manta	4179	1804	5983
Quito	4336	2550	6886
Ibarra	553	109	662
Lago Agrio	1281	649	1930
Tulcán	1713	281	1994
Guayaquil	1702	904	2606
Total beneficiaries	**17638**	**7317**	**24955**

Source: *PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminar)*

Table 3: *Beneficiaries by component*

Component	Beneficiaries
Protection, strengthening and advocacy	18138
Sexual and reproductive health	12365
Shelter and accommodation	1548
Humanitarian assistance for the COVID-19 health emergency	2800

Source: *PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminar)*

1.5 Línea de tiempo del Proyecto PRM

Sep
- Inicio del Proyecto PRM
- Revisión y socialización de Marco Lógico
- Creación y diseño herramientas de monitoreo
- Definición de estructura de coordinación.
- Definición de manejo de bases de datos
- Contratación de personal en cada localidad por las organizaciones.

Oct
- Taller de arranque nacional.
- Definición de la gobernanza del proyecto.
- Definición de flujo de procesos, responsabilidades, roles y POA.
- Inicio de atención psicosocial y legal en territorio.
- Paro Nacional que afecta la ejecución del proyecto.

Nov
- Implementación sistema de registro de beneficiarios
- Mapeos territoriales
- Inicio de actividades colectivas (talleres, capacitaciones y charlas).

Dic
- El proyecto está operativo en todos sus componentes principales en las 6 localidades.

Ene
- Inicio entrega de vouchers de salud para exámenes y medicamentos, consultas médicas y pruebas de embarazo.

Feb
- Inicio de actividades de incidencia.
- Inicio de pruebas diagnósticas de VIH.
- Inicio de asistencia en alojamiento de emergencia.

Mar
- Inicio de estudio sobre DDHH de la población venezolana
- Inicio crisis COVID-19 y decreto estado de emergencia sanitaria.
- Suspensión de actividades presenciales.
- Reprogramación de procesos administrativos y herramientas de verificación.
- Identificación y propuesta de nuevo componente de asistencia humanitaria para COVID-19.

Abr
- Inicio de componente de asistencia humanitaria en respuesta a COVID-19
- Inicio atención en Ibarra
- Reinicio de actividades de atención e incidencia.

May
- Las actividades de asistencia se brindan en los cuatro componentes del proyecto mediante tele-asistencia.
- Se retoman procesos administrativos pendientes.

Jun
- A nivel financiero se evalúa y modifica el presupuesto considerando los ajustes en el marco de la respuesta y adaptación por la crisis de COVID-19.

Jul
- Inicia el proceso coordinación de cierre progresivo de implementación de actividades.

Ago
- Se concluyen las actividades de atención del Proyecto PRM.
- Cierre de actividades programáticas y financieras del Proyecto.

2019 2020

2. EXTERNAL EVALUATION METHODOLOGY

The ex-post evaluation methodology assess management based on PRM Project's results, its programmatic and financial activities, and its communication actions.

The evaluation's specific objectives are as follows:

1) Make a comprehensive assessment based on evaluation of criteria regarding relevance, effectiveness, efficiency, and sustainability of actions.
2) Assess the scope of the communication actions carried out to support project components' execution.
3) Submit conclusions, lessons learned and recommendations regarding the implementation of this Project and its components.

2.1 Evaluation sample

The sample was selected by "Nonprobability Sampling"[1] and corresponds to ≈5% of the assisted and target populations (n = 24,659). Questionnaires respondents were randomly selected from the PRM Project databases, by indicator. The sample size is 947 individual support beneficiaries and 140 collective support beneficiaries, including the migrant and host populations and public officials and authorities. Data disaggregated by age, nationality, gender/sexual orientation, level of education, and city where they were attended is presented below.

AGE	
18-49 años	89%
50-64 años	9%
Más de 65 años	2%

NATIONALITY	
Venezuelan	86%
Ecuadorian	9%
Colombian	5%

CITY WHERE THEY WERE ATTENDED	
Quito	40%
Manta	30%
Lago Agio	10%
Tulcán	6%
Guayaquil	5%
Huaquillas	5%
Ibarra	4%

LEVEL OF EDUCATION	
Primary	7,97%
Secondary	54%
Technical education	9%
University	28%
Postgraduate	1%
None	0,3%

GENDER / SEXUAL ORIENTATION	
Female	67%
Male	25%
LGBTIQ+	8%

1 Nonprobability sampling does not provide all population individuals equal opportunities to be selected; subjects are not chosen at random.

On a qualitative level, semi-structured interviews were carried out with 7 authorities from the different localities where the PRM Project was carried out, 6 members of the technical team from different coordination structures of the PRM Project, and 12 shelter users. Additionally, 4 focus groups were carried out (one per component) with 34 members of the technical team and project participants.

2.2 Evaluation criteria based on logical framework approach

For the evaluation of each of the components of the PRM Project criteria of relevance, efficiency, effectiveness and sustainability was analyzed.

Relevance: It refers to the aptness of the Project response to address the problem statement, that is, whether or not the project had an adequate response to the migration problem, and whether the context on which the project based its problem analysis was maintained. The criterion of relevance is based on primary data collected from interviews and surveys, and on review of documented processes and results. Within this criterion, **adaptability** was also analyzed, which refers to the ability to adapt to external situations outside the intervention plan, which could not have been foreseen by project planning, such as the COVID-19 health emergency. It collects information on how the project was able to respond to external factors that trigger radical changes. It is based on primary and secondary data**.**

Efficiency: It evaluates the use of resources and the execution of planned activities. It is based on primary data from surveys and interviews, and on secondary data collected via review of documents that address the different Project components.

Effectiveness: It evaluates indicators and components' performance. A project is considered to be "effective" when it manages to, or contributes to, generate the changes stated in its objectives. It is based on primary data collected from surveys and interviews, which allow to measure the different results-based management criteria.

Sustainability: It assesses the span of the project's impact, considering the nature of the intervention, in the medium and long term. It is based on the institutional and social capacities built by and for the project; it takes qualitative and quantitative data.

Indicator evaluation is based on efficiency (relation between results and means) and effectiveness (relation between objectives and results; objectives' scope regarding social, political and cultural changes) parameters.

The following factors are analyzed to make the assessment:

1) Relevance and usefulness of the intervention from the perspective of beneficiaries and of local and national counterparts.
2) Most and / or least effective components applied by the Project; differences of the organizations' work compared to other proposals.
3) Most and least efficient actions implemented by the Project, and their scope.
4) Effects caused by Project components on the beneficiary population in an emergency attention context.

To measure effectiveness' degree of compliance, we use the scale shown below:

Range	*Compliance*
Beyond proposed goal	EXCEEDS COMPLIANCE
80% to 100% of proposed goal	FULLY COMPLIES
50% to 79% of proposed goal	PARTIALLY COMPLIES
Under 49% of proposed goal	DOES NOT COMPLY

To measure efficiency's degree of compliance, we use the scale shown below:

Range	*Compliance*
High efficiency; the cost-benefit relation is established.	HIGH
Efficiency reaches part of the actions; the cost-benefit relation is partially established	MEDIUM
Low efficiency; the cost-benefit relationship is not achieved	LOW

This evaluation also analyses the communication strategy management, by measuring (1) the aptness of the means of communication used with the beneficiary population and key actors, which are measured transversally in all evaluative collection tools; and (2) the scope of the communication products and campaigns. This methodological vision allows to assess the relevance of the strategies, including the effectiveness of actions, the efficiency of organizational resources' use, and the influence of the messages.

2.3 Data collection

Structured surveys (with beneficiaries and technical team members) and semi-structured interviews (with members of the technical team that worked on implementation, monitoring and coordination, and with public officials and authorities) were used to collect primary quantitative and qualitative data. Secondary data was collected through document review (information about the project, logical framework, reports, attendance records of workshops and talks, and consultancy reports), focus group discussions (with members of the technical team and beneficiaries), and virtual or face-to-face guided visits to shelters.

Survey, interview and focus groups' participants, did so voluntarily, with explicit consent. Surveys were carried out with 94 people, while 14 individuals were interviewed. These data collection tools were approved by the consortium beforehand.

The list and corresponding links of tools is contained in Annex 2. A series of activities were carried out to collect primary data for each indicator, which are listed in Annex 3; secondary data collection included review of documents listed in Annex 4.

2.4 Evaluation restraints and limitations

For the evaluation a compendium with important information about the PRM Project was provided to partner institutions, in a handy format, such as attention records, vouchers, databases, attendance lists and financial reports.

The beneficiaries and the technical team interviewed, whom took part in focus group discussions, were really helpful and provided useful information presented in this document.

Due to restrictions caused by COVID-19, all contact with the participants was online, except for a face-to-face visit to a shelter in Manta, for which all biosecurity measures were taken.

The evaluation surveyed and interviewed 1,087 people

3. Findings and analysis

The findings and analysis of the evaluation criteria of the components and indicators are presented below. Firstly, relevance, adaptability and sustainability by component is analyzed; then, we analyze efficiency and effectiveness by component and by indicator.

3.1.- Relevance and adaptability

Component 1: Protection, capacity building and advocacy

Protection support (through legal advice, psychosocial support, capacity building, and the implementation of advocacy mechanisms) was appropriate given the context of the vulnerability of the beneficiary population. Of 316 people surveyed on PRM Project's performance, 48% considered the support and assistance received as very useful, while 44% deemed it useful, which supports the relevance of the component.

Legal and psychosocial support was necessary and appropriate to strengthen resilience, knowledge and rights enforceability, as well as to understand and manage protection routes for the migrant and refugee population; this is important considering that 44% of survey respondents declared having been discriminated against because of their nationality.

Structural aspects that cause the assisted population's vulnerabilities, such as the precarious employment situation, strengthen this criterion. Free access to services that could not otherwise be obtained was provided, such as psychosocial attention and legal counseling. Migratory regularization advice provided was also relevant, given the regularization processes demanded to the Venezuelan migrant and refugee population. However, access barriers such as issuance costs of the VERHU visa[2], and absence of passports, which the project was not able to cover, hamper these actions.

Capacities strengthening and awareness-raising of the target population (public officials of protection services and national and local authorities) broadened and improved their knowledge on PRM Project's rights, gender and mobility approaches, as well as on procedures for the attention of migrant and refugee populations. The implementation of municipal and national advocacy mechanisms is also considered relevant, to influence local public policy and expand norms and regulations that ensure protection of migrants and refugees' human rights.

> "I feel alive thanks to the Project… They listened to me. Just knowing that I have someone to talk to makes a difference. Times are rough, but I have a more positive view of the future".
>
> *Sara, usuaria Proyecto PRM, Guayaquil*

Lastly, the component met the adaptability criterion by responding efficiently to a 300% increase in the population supported, as will be seen in indicator 1.2 (psychosocial and legal support). However, implementation of advocacy mechanisms faced limitations to adapt to institutions' times, both in municipal ordinances and in national regulations; the 12 months of implementation are not enough to conclude advocacy processes that could take years to materialize.

2 $50 per person

Component 2: Comprehensive health care

The comprehensive health care provision component was relevant for the assisted population, given their vulnerabilities, such as lack of money, documentation and knowledge of rights to access the health system, where they face xenophobia and discrimination by health officials. In the focus group discussion on PRM Project's experience regarding the provision of comprehensive health care, carried out with the technical team, the migrant and refugee population recognized the aforementioned vulnerabilities as their main access barriers.

According to testimonies provided by the technical team, the collective awareness-raising activities helped the target population (public officials and authorities) acknowledge the universality of health care in Ecuador, notwithstanding the person's immigration status. Several trained and sensitized public health officials reported unawareness of the right of access to health services of migrants, regardless of their immigration status.

> "Thanks to them, I was able to settle in the country. They provided medical attention for my left ear. They helped me raise my self-esteem".
>
> *Luis, PRM Project participant, Huaquillas*

Comprehensive health care was also relevant to address the medical needs of the assisted population. 73% of survey respondents stated that the attention received allowed them to improve their health.

Table 4. Perception of relevance of medical assistance provided (assisted population)

Did the attention received allowed you to improve your health situation?	
No	11,31%
Partially	15,48%
Yes	73,21%
Total	**100,00%**

Direct medical attention provided to the assisted population delivered supplies and medicines in the face of a health system affected by budgetary restrictions and the COVID-19 crisis. The component allowed meeting the most common immediate health needs of the assisted population. The technical team reported that the most recurrent illnesses in the forced-to-migrate population were gastrointestinal and respiratory infections, as well as pregnancy care; stress and STIs are the most recurrent illnesses for the LGBTIQ+ population. The most frequently prescribed medications were antibiotics, which confirms that the largest number of cases were related to infectious pathologies.

Regarding sexual and reproductive health, awareness-raising workshops informed participants about these rights, STIs prevention, and unwanted pregnancies; they were complemented with the delivery of contraceptive methods, condoms, lubricants, rapid HIV tests, STI screenings, and other specialized tests (which were scarce in the public health system during the last 6 months of project execution).

The component's adaptability criterion was evident in the administrative processes for the delivery of supplies, medicines and laboratory tests during the COVID-19 health emergency. All procedures were coordinated online with private health providers as well as public health system medical centers (where available).

Component 3: Shelter and Accommodation

The component was relevant, delivering vouchers for payment of emergency accommodation in hotels or hostels, or to pay rent. Surveys carried out with the assisted population on the integration indicator (indicator 1.5), evidenced that most of the 122 respondents live in rental housing (77%). Forced-to-migrate people constantly face xenophobia and discrimination, besides job instability and low income, which makes it impossible for them to find a place to live in a dignified way. The delivery of economic assistance for accommodation in hostels and to pay rent allowed them to keep their homes and to reduce affectation for their families due to the COVID-19 crisis, which caused many to be evicted for non-payment.

Table 5. Type of housing *(assisted population)*

What type of housing do you live in?	
Rented	94
Other	2
Borrowed	22
Owned	4
Total	**122**

The actions taken to strengthen the selected shelters were relevant, both equipment and training, since these spaces are located along the route of Venezuelan migrants and refugees. The equipment provided allowed them to increase its operational capacity, while the strengthening helped to reinforce knowledge and attention procedures, especially to deal with cases of gender-based violence.

> "We had no place to live... The support provided allowed us to rent a small room and not end up on the street".
>
> *Keyla, PRM Project participant, Manta*

A noteworthy aspect of the component's adaptability is that initially the accommodation and shelter support was designed for short stopovers of people in transit, but the strategy was adapted due to the COVID-19 crisis, directing support to families, to cover rental costs. The surveys on the integration indicator (indicator 1.5) carried out with 123 people from the assisted population showed that most rental payment beneficiaries were people residing in Ecuador for more than one year (21%).

Component 4: Humanitarian assistance for the COVID-19 health emergency

This component was a relevant response to the health emergency caused by COVID-19, as it provided humanitarian assistance to the most vulnerable population through delivery of multipurpose cash transfers and hygiene kits tailored for men, women, babies and families. As shown in the efficiency and effectiveness matrix, 97% of the people surveyed on multipurpose cash delivery (indicator 4.3) considered that it was useful, while 96% deemed the hygiene kit as useful and very useful.

The hygiene kit included a toothbrush, cream soap, sanitary napkins, diapers, antibacterial gel, deodorant, toilet paper, condoms, shampoo, razor, diapers, a facemask, bleach, among others. By having a family and individual presentations (even for babies), individual and group needs were covered; kits were tailored for men and women as well.

The delivery of multipurpose cash allowed the beneficiaries to cover their most necessary and urgent expenses. The money's use largely depended on their priorities, as the interviews show. It was a key element to strengthen the resilience of families during the COVID-19 health emergency, which proves its relevance.

On the other hand, the specific agreements or conventions put in place with public and private organizations were relevant because they allowed to adequately identify the most vulnerable population, thus expanding the coverage of the assistance. The logistical and operational capacities of the partner institutions were used, such as, the Municipality of Manta, whose officials helped delivering hygiene kits to the assisted population.

The inter-institutional cooperation during the emergency was possible thanks to ties previously built between the team's staff and public officials. However, as mentioned by one of the interviewees, it would have been important to share the official agreements with the operational personnel of the participating institutions.

This testimony shows that the scheduled provision of medical services did not stop during the peak of the COVID-19 health emergency. Adaptability of administrative and management procedures made it possible to meet the demand for assistance, despite the emergency measures and restrictions.

The component itself is a clear example of adaptability, since it was not included in original planning, but was incorporated in the midst of the COVID-19 health emergency with its respective indicators, activities and processes; no extra budget was available, therefore, Project funds reallocation was necessary.

> "We performed 180 examinations per month, even during the pandemic. We received training, and could then sensitize our colleagues from other health centers on the importance of assisting forced-to-migrate people".
>
> *Christian, public employee, Huaquillas*

3.2.- Efficiency and effectiveness

Next, we analyze component and indicator's efficiency and effectiveness.

Efficiency and effectiveness by component:

Component 1: Protection, capacity building and advocacy

Efficiency

> *Of 316 people surveyed about different aspects of the PRM Project, 48% considered the care and assistance received as very useful and 44% as useful.*

This component's efficiency was evident in various actions. For example, the training processes for personnel allowed them to recognize and respond to protection incidents and concerns; 2% more trained participants over the original goal, and at a low cost per person[3]. The component's efficiency was evident in the number of social, psychological and legal services provided to the assisted population; attention increased by 300%, at a much lower cost per consultation than the market average[4]. Comprehensive health care delivery was also efficient, by providing the same person simultaneous multidisciplinary attention, such as accompaniment for regularization, legal advice and psychosocial care. This allowed providing various services by means of the same structure.

The surveys highlighted the comprehensive nature of the assistance provided, with a large number of participants that accessed these services. 80% of the 254 interviewees that evaluated this indicator, received attention in a specific area -as planned by the PRM Project-, while the remaining 20% received support in two or more services. Most attentions provided were in the social (54.02%), medical (23.21%), legal (17.86%) and psychological (4.91%) areas.

Likewise, the number of workshops held with local and national authorities as part of the advocacy strategy increased to 108% over the original goal. This shows efficient activity management, which allowed increasing the number of workshops without budgetary implications; the actions carried out by the technical team at the inter-institutional level allowed a dynamic and effective process of discussion, analysis and approval of municipal ordinances and proposals for national guidelines.

3 $5 per person trained

4 The average cost per consultation was $21, compared to the market value that ranges from $50 to $80

The aforementioned shows that the actions of this component required different resources to be available, such as the human resource which included 7 social workers, 7 psychologists and 5 lawyers, whom through joint and coordinated work were able to assist people with legal guidance and psychosocial assistance. Likewise, the lawyers participated in the advocacy commission to develop the strategy that made possible the construction and approval of local ordinances and the preparation of evidence-based studies. Methodological resources are also part of this analysis; these attentions were designed to provide adequate and comprehensive assistance that included relevant information on migrants and refugees' context.

Effectiveness

According to the PRM Beneficiaries Summary 2019-Aug 2020 document (preliminary), the original goal of this objective was 8,437 people, ultimately reaching 18,138 people, thus exceeding the original goal by 114%. Of these assisted population, 13,567 were Venezuelan migrants and 4,571 were Ecuadorians; 8,427 males, 9,596 females and 115 LGBTIQ+ individuals.

The strengthening and training activities carried out made it possible to sensitize 3,722 people from both the assisted and the target populations on issues related to protection procedures and rights, mobility and gender approaches. Attendance records review of ~4% of the total attendees, which is equivalent to 150 people, allowed validating the frequency of trainings and the reliability of the records.

> "I learned how to communicate with the migrant population".
>
> *Heyddi, public employee, Huaquillas*

Most of the 140 trained public employees interviewed (indicator 1.1), consider that the workshops and awareness-raising actions served to recognize and respond to protection incidents and concerns in their locality. The trainings were rated as very useful by 51.43% of respondents, useful by 44.29%, not very useful by 3.57%, and not useful by 0.71%. Learnings' application based on their position and contexts was rated as very applicable by 75%, as applicable by 24.29%, and not applicable by 0.71%.

Most authorities interviewed (81%) considered the trainings helped them expand and strengthen their knowledge to respond to protection challenges, while 11% declared not having learned anything new (8% did not respond). Respondents considered the following fields of learning as innovative: human rights (38%), protection routes (17%), human mobility (15%), sex-gender diversity (9%), vulnerability factors (8%) and others (9%). Of 40 authorities interviewed (indicator 1.1), 30 applied the learnings from the trainings, as

follows: legal assistance (8), protection routes (7), communication strategies (6), social assistance (5) and operational capacities (4).

Regarding the coverage of people in the assisted population whom were referred to psychosocial or legal support services to receive adequate assistance (Indicator 1.2), the PRM Project exceeded its original goal by 300%, mainly due to the increased response demand in the face of the COVID-19 crisis.

PRM Project's effectiveness regarding the implementation of municipal ordinances and protection mechanisms was evidenced in three stages: discussion, presentation and approval of municipal ordinances.

During the **discussion** of local regulations in Tulcán, the ordinance for the protection of vulnerable populations was widely analyzed with other civil society actors. Despite ACF has continuously work alongside the CCRP, no real coordination was achieved that would allow the discussion and joint construction of the text for an ordinance proposal in Tulcán. In Huaquillas, an ordinance petition process was carried out, which was presented and is currently under revision; its objective is to create cantonal protection routes for the migrant population. In Quito, ACF led development of the ordinance proposal on *"Prevention of Trafficking and Comprehensive Attention to Survivors"*.

The strengthening and training activities carried out made it possible to sensitize 3,722 people from the impact population and the target population on issues related to protection procedures and approaches to rights, mobility and gender.

During the **presentation** stage, in Manta, an ordinance proposal for the "Rights Protection of Homeless People" was delivered to the Cantonal Council, thanks to the coordinated efforts of CARE, DD and other civil society organizations. However, there was no political backing for its discussion.

Finally, during the **approval** stage, the ordinance proposals that guarantee the rights of both migrant and gender diverse people in Lago Agrio and Portoviejo were ratified. In Lago Agrio, the ordinance establishes the construction and implementation of the "Cantonal System for the Prevention, Comprehensive Support and Eradication of Violence against Women, Girls and Adolescents". In Portoviejo, the ordinance promotes the "Inclusion, Recognition, Diffusion and Respect for Sex- Gender Diversity".

Furthermore, the three organizations of the PRM Project took part in the Legal Advocacy Roundtable, made up of RED CLAMOR partners (Caritas Ecuador, Scalabrinian Missionaries and Jesuit Refugee Service), ADRA, Red Cross, the legal Offices of

the Pontifical Catholic University, and the Human Rights Program of the Universidad Andina Simón Bolívar. These coordination spaces were efficient because they allowed to: 1) identify limitations faced by the Venezuelan population for their regularization. 2) Develop tailored legal proposals for public institutions and the Constitutional Court on regressive processes on human mobility rights in Ecuador. 3) Take part of IACHR's Hearing 175 where a reasons statement was made that resulted in a request from the Commission to member states to protect the rights of forced-to-migrate people. Advocacy actions were developed alongside the Advisory Council on Human Mobility (ACHM), led by the Office of the Ombudsman of Ecuador, which gave way to the declaration of unconstitutionality regarding decisions of the Executive in relation to the Venezuelan migrant population.

Objective 1: Strengthen institutional and individual capacities to respond to the protection challenges generated by the humanitarian crisis.			
Outcome 1: Implementation of protection and regularization mechanisms by national authorities, with the support of international organizations and/or municipal protection ordinances.			
Outcome 2: The Venezuelan migrant and refugee population receives legal support and protection, particularly LGBTIQ+ individuals and women survivors of sexual violence.			
Indicator 1.1	*Number of personnel trained to recognize and respond to protection incidents and concerns.*		
Goal: 3.637 people *Reach: 3.722 people (102%) (CARE, Alas de Colibrí, Diálogo Diverso, 2020)*			
Efficiency	*Assessment*	*Effectiveness*	*Assessment*
The PRM Project provided training via workshops and awareness-raising activities on human mobility, gender violence, protection of vulnerable groups, and sex-gender diversity. The trainings complied with the established subjects and schedule, which allowed reaching 2% more people over the original goal proposed; this proves that the activities' organization and coverage was efficient. The total investment for this indicator's activities amounts to$18,820.41[5]. Which corresponds to a value of approximately $5 per person trained. The cost-utility ratio was positive, given the general perception of usefulness of material taught in relation to the investment per person.	The indicator meets a HIGH level of efficiency in its programmatic actions.	2,370 men, 1,305 women and 47 people from the LGBTIQ + community were trained, of which 1,008 were Venezuelan and 2,714 Ecuadorian. In the interviews carried out with 140 public officials and members of the host communities that were trained as part of the Project, it was stated that the workshops and sensitizations served to recognize and respond to protection incidents and concerns in their locality. The trainings were rated as very useful by 51.43% of respondents, useful by 44.29%, not very useful by 3.57% and not useful by 0.71%. Most respondents considered the learnings relevant to their position and context, rating these as very applicable (75%), applicable (24.29%) and not applicable (0.71%).	According to people interviewed, the trainings increased theoretical knowledge, as well as practical implementation of the issues addressed. Knowledge had a practical application for 33 of 40 surveyed authorities, allowing them to recognize and respond to protection incidents and concerns, thus reaching the goal of 82.2% of respondents. The indicator achieved a 2% coverage of the total programmed goal. When averaging the coverage with the effectiveness, a 92% reach is obtained, thus, the indicator FULLY COMPLIES (80% to 100% of the proposed goal).

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Indicator 1.2	Number of beneficiaries who report protection violations who are referred to and receive adequate assistance from psychosocial or legal support services, disaggregated by sex and age.		
Goal: 4.800 people Reach: 14.416 people (300%) (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
This reach was achieved with an increase of only 13% over the original component budget of $75,186.22, totaling an expense of $ 85,021.39, which indicates efficient use of resources (CARE, ACF, DD, 2020). The project had a technical team made of 5 lawyers, 7 social workers and 7 psychologists, whom provided attention for the assisted population. Each of the project technicians attended 680 consultations on average (number of total consultations divided by the total number of staff members). This proves high efficiency in the work carried out by those who make up the first line of support, thus making action highly cost-effective. The total investment for Project technical team's salaries was of $314,683.74 (lawyers, social workers, psychologists)[6]. By dividing this value by the total number of attentions, the average value per consultation was of $21, much lower than the market cost, which ranges from $50 to $80 per consultation.	The indicator shows a HIGH level of efficiency in the use of both financial and organizational resources, which allowed the Project to respond to the increased demand.	According to the PRM Beneficiaries Summary Sept 2019-Aug 2020 report (preliminary), this indicator served 6,057 men, 8,291 women and 68 LGBTIQ+ individuals, from the following age ranges: 3,557 aged 0 to 12 years old; 861 aged 13 to 17; 8,712 aged 18 to 49; 987 aged 50 to 64; and 291 aged over 65. This indicator exceeds its proposed goal of 4,800 beneficiaries, reaching 14,416 beneficiaries. Of the 254 people surveyed for this indicator, 70.64% consider that the attention was very useful, 20% useful, and the remaining 9.36% somewhat or not at all useful. The attention contributed to solve their necessity for 71.61% of respondents; it partially helped for 18.22%, while for the rest it did not help. 71% of the beneficiaries are satisfied with the services provided, while 91% rated that the information received as clear and understandable. It is evidenced that most the surveyed assisted population considers that the attention was of high quality. This indicator was effective in by ensuring protection support (legal, psychosocial, social and health services) to a large number of people. The reach exceeds the programmed goal by 300% (4800 people). This is due to increased demand given the COVID-19 health emergency since April 2020, and because the technical team provided online remote assistance while other organizations suspended activities.	By averaging the final reach value (300%) by the utility (90.64%), satisfaction (71%) and clarity of information (91%), we get 139%, thus, the indicator EXCEEDS COMPLIANCE (beyond the proposed goal).

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Indicator 1.3	*Number of workshops held with local and national authorities as part of the advocacy strategy.*		
Goal: 48 workshops and awareness-raising activities *Reach: 100 workshops and awareness-raising activities (CARE, Alas de Colibrí, Diálogo Diverso, 2020)*			
Efficiency	*Assessment*	*Effectiveness*	*Assessment*
According to three Project execution follow-up documents[7] , the workshops held were as follows: 6 during the first quarter, 61 during the second quarter, and 33 during the last quarter. These trainings followed a fluid execution schedule that allowed to exceed goal fulfillment by 108% within the scheduled time. The investment for the workshops was 4,513.03, which means an approximate cost of $45[8] per training activity. Increased reach by 108% over the original goal evidences high cost-effectiveness of the number of workshops compared to the invested value, compared to the increased coverage of trained people (509 officials and authorities sensitized).	The indicator shows a HIGH level of efficiency both in the use of financial resources and in cost-effectiveness.	The PRM Beneficiaries Summary Report Sept 2019-Aug 2020 (preliminary) established 48 workshops with national and local authorities as the goal. According to reports, 100 workshops on regularization processes were carried out, as well as roundtables of legal analysis, and the construction and socialization of proposals and ordinances, with participants, local governments and the Association of Municipalities of Ecuador. The PRM Beneficiaries Summary Report Sept 2019-Aug 2020 records(preliminary), as well as other follow-up documents, evidence that the project exceeded the proposed goal of 48 workshops and/or activities by 208%.	The document review attests that the events were in fact held, thus, this indicator EXCEEDS COMPLIANCE (beyond the proposed goal).

7 Summary of beneficiaries according to the **PRM Indicator Matrix** Sep-Oct 2019, **Summary of Beneficiaries According to the Indicator Matrix** Sep 2019-Mar 2020,

8 **Summary of Beneficiaries According to the Indicator Matrix** Sep 2019-jun 2020

Indicator 1.4	*Implementation of at least one formal migration regularization mechanism and/or municipal ordinances by local authorities in the 6 selected municipalities, with the support of international organizations and/or humanitarian actors.*		
Goal: 6 mechanisms *Reach: 5 mechanisms (83%) (CARE, Alas de Colibrí, Diálogo Diverso, 2020)*			
Efficiency	*Assessment*	*Effectiveness*	*Assessment*
Advocacy actions show a positive balance between the means used and the results obtained. The municipal ordinances were developed in three phases thanks to the actions implemented by the Project technical team: *1)* Discussion; encouraging and actively participating in dialogue processes and the implementation of local regulations. This was achieved in Quito, Huaquillas and Tulcán. *2)* Presentation; regulations are structured and presented to local collegiate bodies (cantonal councils). This was done in Manta. *3)* Approval; ratification of local and/or national regulations that protect the rights of the migrant population. This was achieved in Lago Agrio and Portoviejo. This shows that the PRM Project was highly efficient in the construction of spaces for dialogue with local authorities in Tulcán, Lago Agrio, Huaquillas, Quito, and, to a lesser extent, in Manta. As well as in active participation in multiple national coordination spaces. The total investment for this indicator was $5,574.57[9], which proves high cost efficiency in relation to its effectiveness, particularly considering the actions have a broad national impact.	The indicator meets a HIGH level of efficiency that generated unambiguous results in the local regulations implementation processes, as well as national level proposals.	The municipal ordinances were approved in the border canton of Lago Agrio (ACF intervention area) and in Portoviejo (next to Manta; CARE and DD intervention area). In Lago Agrio, the ordinance establishes the construction and implementation of the "Cantonal System for the Prevention, Comprehensive Support and Eradication of Violence against Women, Girls and Adolescents". In Portoviejo, an ordinance, which promotes the "Inclusion, Recognition, Diffusion and Respect for Sex-Gender Diversity", was approved. However, the effectiveness of the implementation of local ordinances demands continuously monitoring municipal governments.	The goal established the ratification of six local regulations in specific territories, though, one was achieved in Lago Agrio, thus, this indicator DOES NOT COMPLY on effectiveness (up to 49% of the proposed goal), reaching 16% of the goal.

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Indicator 1.5	Number of beneficiaries who report they can integrate and /or fit in in the host communities in a dignified way.		
Goal: 2.400 people Reach: 2.070 people (86%) (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
The efficiency measured by dividing the total expenditure by the total number of beneficiaries, results in an investment of approximately $19.14 per direct beneficiary[10]. On the other hand, the beneficiaries' perception of usefulness vis-à-vis the project actions results in a positive balance of 93% (total and partial), and of 89% (total and partial) regarding the Project's contribution on rights awareness raising. Therefore, the indicator's cost-utility factor is high since the investment made to carry out Project actions allowed the assisted population to have greater access to services, tools and knowledge. The aforementioned calculations show high cost-effectiveness, which allowed the assisted population to increase knowledge on rights and attention procedures at a low cost per beneficiary; it also allowed to expand the number of workshops and awareness-raising events significantly, without affecting the budget.	The indicator shows a HIGH level of efficiency in the use of both financial and organizational resources.	In the PRM Beneficiaries Summary Report Sept 2019-Aug 2020 (preliminary), this indicator's goal established the dignified integration of 2,400 people from the assisted population in the host communities. The PRM Project surveyed 2,163 beneficiaries, of which 2,070 (1,374 women, 683 men, and 14 LGBTIQ+ individuals) stated that the project effectively helped them to integrate. 97% declared being fully satisfied, 2% partially satisfied, and 1% not at all satisfied. The factors of integration that were measured in the survey were: access to services that assure enjoyment of rights, knowledge of rights, information / tools for decision-making, and practical tools to integrate into the community. 122 interviews were carried out for the evaluation, which constitutes ~5% of the goal. When asked if the project had helped them to integrate into the host community, 49 out of 99 answered that not at all. The remaining 50 identified multipurpose cash transfers, knowledge of their rights, psychological support, and others, as help provided by the Project for their integration. 79% of respondents (97 people) consider the support received helped them resolve their worries or difficulties, 14% consider it partially helped them (17 people), while 6% (7 people) consider it did not help them at all; 1 person did not respond.	The effectiveness of the indicator based on the level of satisfaction and perceived usefulness of the services that are part of this component, calculated by averaging the general perceptions in all related indicators (indicator 1.1, indicator 1.2, indicator 1.3, indicator 1.4), was of 84, 54%, thus, the project FULLY COMPLIES (80% -100% of proposed goal).

10 The total Project investment according to the budget execution was of approximately $ 472,049 (not including the technical team). The beneficiaries report accounts for 24,659 people in all components. The calculation is done by dividing the total investment of all activities by the number of beneficia-

Efficiency

As shown in the analysis matrix, the component's indicators were efficient regarding the timely provision of individualized medical attention based on the needs of the assisted population. The collective activities to strengthen the capacities and knowledge of the assisted and target populations were cost-effective, as they delivered a comprehensive awareness-raising process in a short period, to an ambitious coverage goal.

The efficient use of the component resources is shown, by partner, in the budgetary execution. The component's original budget was $ 84,524.84, while the total expenses amounted to $196,618.74, with a resulting difference of $12,093 [11]. When averaging the original goals of the component's indicators, an increase of 21% over the projected goal is evidenced; this increase, however, had a minimal affectation for the budget.

Furthermore, the costs for primary health care per person were significantly lower than the market cost; and access to attention was agile according to the respondents. This was possible because the Project generated a case referral system, in which comprehensive health care was complemented with the participation of various actors from institutions called to protect and assure enjoyment of the rights of the migrant population. Additionally, the referrals allowed improving access of the assisted population to the National Health System, thanks to the administrative actions and support networks of the technical team, whom managed to add the cases into an overloaded health system.

Sexual and reproductive health was another important cornerstone of the Project's health strategies. Pregnancy tests, ultrasounds and screenings (HIV, STIs, pregnancy screenings, and other prevalent pathologies) were covered through vouchers delivery, which the assisted population could exchange with selected providers. The vouchers could include up to three services depending on the technical team's assessment, based on SOP. The value of the vouchers was $50 for medicines, examinations or medical consultations for general health needs, $20 for HIV and STIs screening tests, up to $50 for pregnancy tests and SRH screenings, and up to $14 for contraceptives. For extreme cases of high vulnerability, and based on the professional's assessment, these amounts could be increased.

It should be noted that the HIV and STI screenings were complemented with emotional support, as well as pre and post-test counseling, which were delivered by the technical team or by local providers of these services. According to a Project technician: "*It is very painful and touches your heart when a patient calls to ask*

11 Calculation based on the Budget Execution by Partner, as of August 2020.

about his or her result and you have to tell them that they are HIV positive. The Pygmalion effect [12] *of the technical team allows the person with B20 to bring out all their survival strength, so they can overcome their crisis in a foreign country. The humanitarian team gives them strength to fight for their life and health".* This sensitive, empathetic and respectful approach allowed to strengthen the comprehensive care processes.

The prevention strategies in sexual and reproductive health were accompanied by workshops and awareness-raising spaces for both the affected population and the personnel of humanitarian organizations and public officials.

Condoms and lubricants delivery focused on prevention of STIs and HIV was another strategy implemented on sexual and reproductive health. Condoms were delivered on individual and collective consultations, and via dispensers located in health centers; delivery was complemented with information and communication material on sexual and reproductive health and HIV and STIs prevention. The prevention strategies also included workshops and awareness-raising spaces for both the assisted population and the personnel of humanitarian organizations and public officials, to reinforce sexual and reproductive health concepts and approaches.

Effectiveness

The component's coverage expansion was effective, with a 21% increase over the original goals, particularly in the number of patients who received primary health care, and SRH services. Referrals, however, are perceived as ineffective. Of the 20 respondents who had been referred to health services, 8 considered the action was effective in solving their health needs, 1 considered it was partially effective, 9 considered it did not help, and 2 did not respond. No definitive conclusions can be made due to the small number of replies, but it serves as a reference, especially since it is possible that the survey respondents base their perception on the public services to which they were referred, and not on the project itself.

12 In psychology and pedagogy, it refers to the phenomenon wherein high expectations lead to improved performance in a given area.

The effectiveness of the component decreases when the fact that most survey respondents perceive that the actions served them to solve their needs only partially (56.97%) is considered. On the other hand, effectiveness increases when the perception of most respondents (86.72%) regarding the information received in collective activities and by PRM Project's technical team, as useful and very useful, is considered.

Table 6. Perception of usefulness of the information received (assisted population)

How would you rate the information provided by the technical team?	
Very useful	13,99%
Useful	72,73%
Not useful	13,29%
Total	**100,00%**

An important piece of data found on this evaluation criterion is that the perception of usefulness of the information provided in collective activities and by the technical team is greater for those who do not use contraceptive methods compared to those who do use them.

Table 7. Perceived usefulness of the information received on contraceptive methods (assisted population)

How would you rate the information provided by the technical team on sexual and reproductive health?	
Very useful	
Does not use contraceptives	9
Does use contraceptives	4
(Did not answer)	7
Little useful	
Does not use contraceptives	12
Does use contraceptives	3
(Did not answer)	4
Not useful	
Does not use contraceptives	68
Does use contraceptives	9
(Did not answer)	27

Finally, sexual orientation and gender identity disaggregated data on the usefulness of primary health care services, treatments and/or medical supplies shows that the perception of usefulness regarding solution of a need and/or incident was lower for LGBTIQ+ individuals compared to the heterosexual population.

Table 8. Perceived usefulness of sexual orientation services (assisted population)

Did the care received allowed you to cover your need and/or incident?	
Bisexual	
No	12,00%
Partially	8,00%
Yes	48,00%
(blank)	32,00%
Gay Men	
No	8,00%
Partially	4,00%
Yes	48,00%
(blank)	40,00%
Heterosexual	
No	8,19%
Partially	10,53%
Yes	56,14%
(blank)	25,15%
Lesbian	
Partially	45,45%
Yes	27,27%
(blank)	27,27%

Objective 2:	*Provide the target population with information and comprehensive psychosocial support and sexual and reproductive health services, particularly for people living with HIV and other sexually transmitted diseases.*
Outcome 1:	*Improved mechanisms for primary health care and sexual and reproductive health that respond to the needs of the Venezuelan migrant population are available.*
Outcome 2:	*Psychosocial support is available for Venezuelan refugees and migrants, whom can mingle and integrate in a dignified way in host communities.*
Indicator 2.1	*Number of beneficiaries, by sex and age that received primary health care, and medical treatments and/or supplies.*
Goal: 4.370 *Reach: 5.860 (CARE, Alas de Colibrí, Diálogo Diverso, 2020)*	

Efficiency	*Assessment*	*Effectiveness*	*Assessment*
Primary health care provided medical advice and patients' referrals, according to diagnosis and medical criteria based on the first level of attention, that is, attention modalities that focus on self-care and outpatient consultation. The total investment for this indicator was $102,585.36, averaging $17 per person attended (5860 people from the assisted population)[13]. Given the reach, the general perception of usefulness of the attention provided (88.69% positive ratings), and the relative market value, the indicator's cost-utility relation is high. Similarly, 88.37% of survey respondents said their requirements were met directly by the Project, which evidences operational and administrative agility that allowed access and coverage. The procedures established with providers of supplies and medicines, which included home delivery and verification through digital means during the pandemic, were efficient strategies that used virtual and adaptive modalities.	The indicator meets a HIGH level of efficiency given the factors mentioned in both cost-usefulness, efficiency of administrative actions, and cost per person attended.	The PRM Beneficiaries Summary Report Sept 2019-Aug 2020 (preliminary) set 4,370 beneficiaries as the goal of this indicator, with a final reach of 5,860 beneficiaries, of which 2,539 were men, 3,312 women and 19 LGBTIQ+ individuals; thus, exceeding the planned goal by 34%. The 230 interviews conducted evidenced there was wide access of LGBTIQ+ people to primary health care services, treatments, and supplies. Of those surveyed, 10.78% define themselves as bisexual, 10.78% as gay, 4.74% as lesbian and 73.71% as heterosexual. The indicator also covered a broad age range: 82.76% aged 18 to 49 years old, 11.64% aged 50 to 64, and 5.60% aged 65 and over. Consequently, the indicator's coverage on sexual orientation, gender identity and age group was effective. Furthermore, survey respondents perceived the services received as useful. 88.69% consider that the services helped them solve their needs. However, the services were considered useful by 44% of LGBTIQ+ people.	By averaging the total coverage of 134%, with the general perception of utility of 88.69%, with the utility perception of the LGBTIQ+ participants of 44%, the result is 88%; thus, the indicator FULLY COMPLIES (80% to 100% of proposed goal).

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Indicator 2.2	Number of beneficiaries referred to the health care services.		
Goal: 1.400 people Reach: 1.931 people (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
The efficiency of the technical team's administrative actions allowed increasing case referrals to the National Health System by 38% over the original goal, despite the high demand and the budget restrictions that affect public services. For example, in Huaquillas alone, the Project referred 670 beneficiaries to medical centers in the area. Therefore, the referral actions were cost-effective. Case referrals were also attended by private institutions such as CEMOPLAF, Associated Radiologists, and the Red Cross, which made it possible to refer cases that required attentions that could not be contended by health centers. These cases received attention at costs below the market average, thanks to the agreement signed with private health providers.	The indicator meets a HIGH level of efficiency in its administrative and operational actions.	The beneficiaries' summary by indicator[14] shows that the coverage of case referrals to other institutions was 1,931, which included medical, psychiatric, psychological support, and for cases of gender-based violence. The beneficiaries were 624 men, 1,299 women and 8 LGBTIQ+ individuals; 1599 Venezuelans and 332 Ecuadorians. Document review shows that the percentage of case referrals out of the total component's beneficiaries corresponds to approximately 15%, while of the 152 survey respondents, 20 stated that their case was referred, which corresponds to 13%. These percentages, obtained via interviews and by dividing total of references by the component goal, are similar, consequently, the reports are reliable and the case referrals in fact occurred in the numbers reported.	The indicator EXCEEDS COMPLIANCE (beyond the proposed goal) with a reach of 38% over the original goal.

[14] PRM BENEFICIARIES SUMMARY Sept 2019-Aug 2020 (preliminary)

Indicator 2.3	Number of beneficiaries receiving appropriate assistance from sexual and reproductive health services, by gender and age.		
Goal: 5.000 Reach: 5.131 (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
The actions of the indicator are considered to be efficient, since the PRM Project's assisted population could access to different types assistance: 1. Pregnancy tests, ultrasounds, and sexual and reproductive health-related screenings. 2. HIV and STIs screenings. 3. Delivery of condoms and lubricants focused on STIs and HIV prevention. 4. SRH workshops and awareness-raising meetings. This proves efficiency in administrative and operational management, since various services were provided within the same line of action. This also shows that the Project technical team handled various operating procedures. The total investment for the services mentioned above was $133,597.59, averaging $29 per person attended (4574 people supported)[15]. This values is below the market average, which ranges from $80 to $100 per person.	The indicator shows a HIGH level of efficiency, given the array of services, and the investment made in relation to the range of coverage. The indicator shows a HIGH level of efficiency, given the array of services, and the investment made in relation to the range of coverage.	The PRM Beneficiaries Summary Report Sept 2019-Aug 2020 (preliminary), established the indicator's goal at 5,000 beneficiaries, finally reaching 4,574: 1,725 men, 2,790 women, 59 LGBTIQ+ individuals; 2797 Venezuelans and 1777 Ecuadorians. Furthermore, 37.58% of survey respondents considered that the support received allowed them to cover their needs. Information conveyance on sexual and reproductive health had a greater effect; 86% of respondents considered this type of information very useful and useful.	The attention and information received were perceived as useful by 61.79% of survey respondents. The indicator had a final reach of 91% of it proposed goal, that is, 4,574 people out of 5,000. Therefore, the effectiveness, measured by averaging the final coverage with the perceived usefulness, reaches 76%; thus, it PARTIALLY COMPLIES (50% to 79% of proposed goal).

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Indicator 2.4	Number of workshops aimed at migrants and host communities on sexual and reproductive health rights promotion.
Goal: 120 Reach: 145 (CARE, Alas de Colibrí, Diálogo Diverso, 2020)	

Efficiency	Assessment	Effectiveness	Assessment
The total investment for conducting the workshops was $6,657.06, averaging $45 per workshop [16]. Document review allowed verifying that the workshops were carried out continuously both face-to-face and online. Resources' use was efficient in both programming and execution of the workshops, since the means available were used to avoid delays or halts due to the health emergency. The topics covered in the workshops were managed efficiently, and the trainings were used to raise awareness on various PRM Project subjects, such as sex-gender diversity, gender, sexist language and chauvinist actions, vulnerable groups, gender-based violence, cycle of violence, consequences of GBV, care during pregnancy, HIV and contraceptive methods. The Project also trained the technical team on humanitarian action and GBV, cluster systems, GBV approach in humanitarian actions, and risk factors. The expertise and experience of the Project technical and coordination teams were used in trainings, thus, no external facilitators were hired. This shows efficient use of human resources. Furthermore, the workshops included pedagogical material specifically designed to support the SRH training processes. According to the expense report, the amount invested in educational and awareness-raising material was $4,985 , which is low considering the number of workshops and people trained on SRH (3,801 people)[17]. Surveys show that 81.72% of respondents are interested in delving into the topics learned, which proves high cost-usefulness.	The indicator meets a HIGH level of efficiency based on cost-utility, number of participants reached by trainings, number of workshops, and investment made.	The PRM Beneficiaries Summary Report Sept 2019-Aug 2020 (preliminary) established the execution of 120 workshops on emotional health, peace education, or SRH as the indicator's goal. The consortium organizations held 145 workshops in the different territories. Most of the authorities interviewed for the protection indicator (indicator 1.1) rated the learnings as very useful (66.94% for human mobility, 62.50% for gender violence, 72.65% for protection of vulnerable groups, 68.75% sex-gender diversity); therefore, the training actions had the expected result. Of the total survey respondents who attended the workshops, 81.72% reported being interested in deepening the knowledge acquired (11.67% on vulnerable groups, 19.70% on rights of the migrant population, 2.18% on human rights, 10.94% on sex-gender diversity, 2.91% on legal procedures, and 2.92% on protection), for which, effectiveness is evident for awakening the interest of the assisted and target populations. Finally, the workshops reached 3801 people, providing training on SRH, rights, emotional resilience, conflict resolution, peace education, non-violence and gender identity.	By averaging the coverage (121%), the perception of usefulness (67.71% on average) and participants' interest in deepening knowledge (81.72%), this indicator reaches an effectiveness of 90.14%, thus it FULLY COMPLIES (80% to 100% of proposed goal). *The actions in sexual and reproductive health were efficient, since the population affected by the PRM Project had access to different assistance:* 1. *Pregnancy tests, ultrasounds and screening for sexual and reproductive health conditions.* 2. *HIV and STI screening.* 3. *Delivery of condoms and lubricants with a focus on STI and HIV prevention.* 4. *SSR workshops and awareness spaces.*

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Component 3: Shelter and Accommodation

Efficiency

Efficiency in budget management stands out among overall results. Indicators in this component's achieved goals versus the original goals show an increase of 7% on average, while the budget increased only 2.77%. The budget (CARE, ACF, DD, 2020) was $ 115,500, and the final expense was $ 118,700, 64, that is, a difference of $ 3,200 between what was budgeted and what was executed. The balance between the investment and the total beneficiaries of this indicator (1,345 beneficiaries) shows an approximate total cost of $ 88 per person served.

Another factor that boosted efficiency in the use of resources was the close inter-institutional cooperation between the consortium and the shelters, such as Casa del Migrante Buen Samaritano in Lago Agrio, Manos Unidas Tejiendo Progreso in Tulcán, and Juan Bautista Scalabriniane (JUBASCA) Foundation in Manta, which allowed adequate identification of specific adaptations required in each of the spaces.

The investments made are detailed below:

- Casa del Migrante Buen Samaritano in Lago Agrio: securing room doors, adaptation of the training and events room, and biosecurity equipment. The shelter serves migrants in transit.
- Manos Unidas Tejiendo Progreso in Tulcán: video surveillance system, cell for gas tanks, and screen printing octopus machine. The shelter is a dedicated and safe space for women survivors of GBV and SV.
- Purik Huasi Temporary Housing Center in Tulcán: a washer-dryer and gas tank. This is a shelter for migrants in transit.
- Casa de Protección Nido ACF in Quito: dining room, new bedding, three computers, desk, lockers with security, printer, sofa bed, security system, adaptation of reading room, and acquisition of biosafety equipment. This is a protection-space for adolescents and women victims of trafficking.
- Juan Bautista Scalabriniane Foundation (JUBASCA) in Manta: adaptation of bathrooms, kitchen, provision of bunk beds, and adaptation of laundry and bathrooms. This is a shelter for migrants.

Finally, the rental assistance and temporary accommodation coverage time exceeded the initial expectation of 15 days and, in so, strengthened the protection of the impacted population and their families. When asked to 51 people surveyed about how long the financial assistance lasted, most answered that it was one to two

months. This shows that the actions were more efficient than projected. The sheltering and accommodation provided meant for recipients also the provision of monetary stability that prevented stress and anxiety factors.

Effectiveness

The component's effectiveness resides in the expansion of the payment coverage for rent or emergency accommodation in hotels or hostels for residents (migrants or refugees) and not only for the target in transit population. This raised the original goal by 35%, with 1,345 people served, prevented street situations, and protected recipients' rights. Staying in a physical residence allowed the beneficiaries to have safe spaces to rebuild their life plans in the face of the new normality generated by the pandemic, as witnessed in the focus group developed with the technical team.

> "We had to organize the life experience at that time. Being indoors allows us to have a physical point where to return to. The accommodation allowed users to organize their life plan and have a safe place that protected their integrity and belongings ".
>
> *Enrique, PRM Project Technical Team Member, Lago Agrio.*

Besides, the project's investment in facilities and equipment in the shelters intervened allowed to strengthen protection and security parameters. These improvements allowed the shelters to increase their service capacity in terms of quality of services and the number of people they are capable of serving. The actions' effectiveness is also reflected in the positive perception that 96% of the people interviewed through the PRM Project Satisfaction Survey had. Most of the surveyed mentioned being satisfied with the care received in the shelters.

People in human mobility face constant xenophobic and discriminatory practices in addition to instability and shortage of income, which makes it impossible for them to find a place to live in decent conditions.

Objective 3:	*Provide the target population with expanded and/or improved access to temporary shelters and safe protection spaces.*
Outcome 1:	*There are shelters and hostels available in the city of Ibarra and Quito for migrants both for asylum seekers and migrants, as well as vulnerable Ecuadorian citizens, particularly LGBTIQ + and women survivors of sexual violence.*
Indicator 3.1	*Number of beneficiary population in the project area that receives shelter assistance (e.g., cash, rehabilitation, etc.), by gender.*
Goal: 1.000 people *Reach: 1.345 people (CARE, Alas de Colibrí, Diálogo Diverso, 2020)*	

Efficiency	*Assessment*	*Effectiveness*	*Assessment*
The total cost of the investment in payment of rents and accommodation vouchers was $ 79,446.54, which gives an average of $ 59.06 per person served (1,345 total population served). Given that most of the people surveyed for this evaluation live in rented spaces and that, according to the survey report, the average duration of assistance was 1 to 2 months, it is realized that the investment was cost-effective. The vouchers for and temporary accommodation and payment of rents allowed to prevent vulnerability factors such as housing loss. Besides, this strategy made it possible to support the daily lives of the families and the users' mental health. Therefore, the investment had a high level of cost-utility.	Considering that the assistance received by the families met urgent housing needs at a low investment cost, lasted longer than expected, and made it possible to prevent anxiety and stress factors, the indicator has a HIGH level of efficiency.	In the summary of beneficiaries by indicator[20], 1,000 beneficiaries are defined as a target. 1,345 people were served: 588 men, 736 women, 21 LGBTIQ+; 1,250 Venezuelans and 95 Ecuadorians. Of the planned goal, a final coverage of over 35% was achieved. For the evaluation, a telephone questionnaire was conducted with 51 beneficiaries, ~ 5% of the previously described users' goal. Of the people surveyed for the evaluation, 38 reported the help as very useful, 12 as useful (largely because it prevented street situations), and 1 as not very useful. Staying in a physical residence allowed the beneficiaries to have safe spaces to rebuild their life plans in the face of the pandemic's new normal.	Based on the fact that the final coverage of beneficiaries reached 135%, it is defined that the indicator EXCEEDS COMPLIANCE (beyond the proposed goal).

20 PRM BENEFICIARIES SUMMARY Sept 2019-Aug 2020 (preliminary)

Indicator 3.2	Percentage of people satisfied with the shelter assistance received.		
Goal: 90 % Reach: 96% (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
The total investment for the improvement of infrastructure and furniture was $ 35,722 for 4 shelters in Quito, Lago Agrio, Manta, and Tulcán[21]. Interviews with the shelters' administrators (Tulcán, Lago Agrio, and Quito) indicate that investments were around $ 5,000 in the shelters Manos Unidas Tejiendo Progreso in Tulcán and Migrante Buen Samaritano in Lago Agrio; $ 1,200 at the Purik Huasi Temporary Housing Center in Tulcán; $ 13,504.97[22] in the Casa de Protección Nido ACF in Quito and $ 8,000 in the JUBASCA shelter in Manta. The efficiency of the actions implemented occurred largely because identifying needs was carried out together with each shelters' management to know the essential areas of investment and improvement. Likewise, it should be mentioned that the training processes were carried out until the end of the project, in August 2020, and were carried out during the project's entire execution, including during quarantine.	The cost-utility ratio of the investment is evident in that 96% of the people interviewed in the PRM Project satisfaction survey rated the care received in the shelters as satisfactory. Besides, according to the visits, the investment of financial and organizational resources has improved, thanks to close coordination, the functioning of the four spaces visited. Therefore, the indicator meets a HIGH level of efficiency.	In the PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary), the goal of the indicator is 90% satisfaction with shelter assistance, achieving a 96% range, according to satisfaction surveys.	According to the number of 96% satisfied people, the indicator COMPLIES FULLY (80% -100% of the goal).

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22 Information provided by ACF's Finance Department.

Indicator 3.3	Number of beneficiaries who report having accessed temporary shelters and protection spaces at project sites.		
Goal: 250 people Reach: 203 people (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
As was verified in the visits, the investment efficiency made it possible to have shelters with better physical capacities. The adaptations improved the shelters' attention and coverage, which allows increasing the number of people served, plus in better conditions. The adjustments in laundries, bathrooms, rooms, and furniture for the people served, and the improvements in administrative capacities, security systems, and machinery efficiently contributed to the shelters being spaces of protection.	The indicator presents a HIGH level of efficiency, given that all the planned shelters' infrastructure has been improved so that they can comply with protection parameters. However, there is a warning factor in the free access shelters visited physically (JUBASCA, Manta) and virtually (Buen Samaritano, Lago Agrio), where no specialized care spaces for women or the LGBTIQ+ community were identified. This concern was evident in one of the interviews carried out, where the interviewee claim to have certain fear for men's presence.	In the PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary), the indicator's goal projected that 250 beneficiaries have access to temporary shelters and protected spaces. In this summary, it is mentioned that the final coverage of the indicator was 52 men and 121 women, of which 126 were Venezuelans and 47 Ecuadorians. This sums a total of 203 beneficiaries, corresponding to 81% of the projected goal. Besides, as stated in the interviews with the shelter staff, capacity building through training allowed to improve and broaden knowledge in the project approaches. This allowed the actions of the personnel to be framed within protection parameters.	The indicator reached 81% of what was programmed, so it is considered FULLY COMPLIES (80% -100% of the goal). It should be taken into account that during the state of emergency due to COVID-19, the health authority temporarily suspended access to the shelters, which affected the total goal's fulfillment.

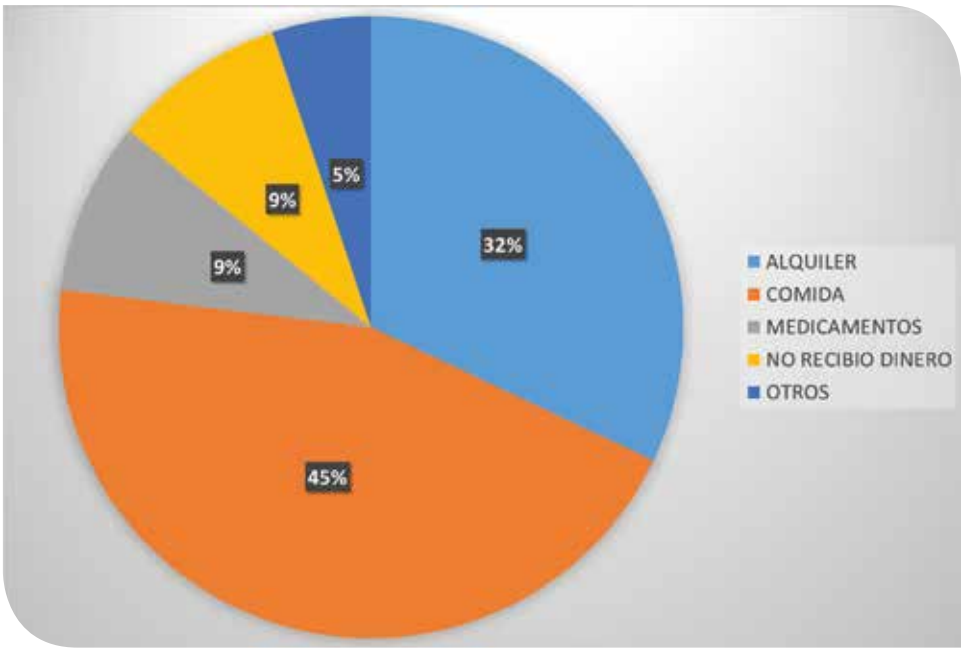
Efficiency

The component demonstrates efficiency in its actions, as it is evident in the following. Firstly, cooperation agreements were quickly established with 6 local actors in Huaquillas, Tulcán, Quito, Manta, and Ibarra, which increased the scope and speed of humanitarian assistance, as assistance distribution was shared through the logistics structure of partners and allies.

Second, the delivery of hygiene kits and multipurpose cash was an efficient way to use resources, as there was broad coverage of the assisted population with relatively low costs. For example, the total value invested per person was: in the kit, approximately $ 26; and in multipurpose cash, $ 129. Upon completion, the consortium invested a total of $ 102,525.12[23] in the humanitarian assistance component. The total assisted population covered between the two indicators was 3.340 people[24] , which gives an approximate investment of $ 30 per beneficiary. According to the matrix by indicators, it is observed that the component's cost-utility ratio was high.

Finally, as previously demonstrated, multipurpose cash had several uses according to the families' needs. Still, it was used, above all, for food and rent payment, covering the basic needs of housing and food security of the people surveyed (see Graph 1). Furthermore, 90% of those surveyed consider that aid delivery was agile, which shows efficiency in administrative processes. Hence, the administrative actions were cost-effective since, with low investment, wide coverage of people was reached through an efficient distribution channel such as ATMs.

Graph 1. Use of multipurpose cash



Source: Ex-post assessment. Prepared by: Octaedro

23 Budget execution report by partner. August 2020.

24 PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary).

Effectiveness

The component was effective in producing spaces for cooperation with stakeholders and allies as it met the planned goal. The agreements reached had an impact on territorial coverage and the scope of assistance. In addition, the component was effective in delivering multipurpose cash to an assisted population of 1,674 people; this represents a reach that passes the projected goal of 1,560 people by 7%. The same occurs with the delivery of hygiene kits with a reach of 1,716 people, which corresponds to 80% more of the projected goal of 942 people.

The multipurpose cash had several uses according to the needs of the families. The use of the aid was directed mainly towards food and rent payment, covering the basic needs of housing and food security

Respondents confirm the effectiveness of humanitarian assistance by stating in high percentages that the kits and multipurpose cash were useful. For 96% of the people, the hygiene kit was useful and very useful; for 97% of recipients of multipurpose cash, this was useful and very useful.

The amounts delivered through multipurpose cash were $ 70 for individuals, $ 120 for families made of two individuals, and $ 150 for families made of three or more individuals. Regarding the duration period, 57% of beneficiaries surveyed responded that it lasted less than a month, while for 43%, it lasted more than a month. Given the characteristics of use and duration of this aid, it is considered that the strategy was effective since the component provided financial support for nearly half of the people surveyed. The same happened with the hygiene kit, which lasted longer and provided a certain saving capacity to the families who received it.

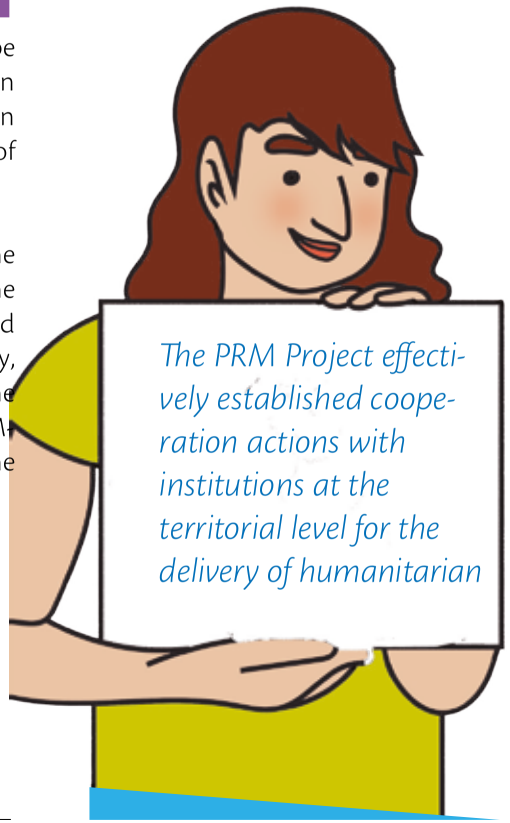
Objective 4:	Provide the target population with emergency assistance.		
Indicator 4.1	Agreements with MIES and GAD for the delivery of humanitarian aid and follow-up (establish joint actions).		
Goal: 6 agreements Reach: 4 agreements (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
The efficiency of the actions rests in the establishment of cooperation with the institutions at the territorial level in a relatively short period of time. According to the interviews carried out with officials, this collaboration was the extension of the previous work between the consortium organizations and the territorial institutions, a work based on experience and trust that fostered the conclusion of agreements. The technical team's actions allowed the agreements to be concluded expeditiously, in an approximate time of 15 days to 3 weeks.	The efficiency of the indicator is measured according to the speed with which the agreements for the delivery of assistance were finalized. The average time to carry out this approach and coordination with public institutions ranges between 6 months and 1 year, so speed was demonstrated to build cooperation spaces. These efforts allowed achieving the 6 agreements foreseen in the goal.[25] The actions carried out by the technical team are considered efficient in achieving the planned goal. Therefore, the indicator had a HIGH level of efficiency	In the Summary of Beneficiaries of PRM Sept 2019-Aug 2020 (preliminary), the achievement of 6 agreements is established as a goal. The report of beneficiaries accounts for 4 agreements reached as a final result[26]. However, according to the follow-up and monitoring of the project[27], we have worked with a total of 6 institutions and organizations in the delivery of humanitarian aid: in Huaquillas, with the Decentralized Autonomous Government (CARE); in Ibarra with the cantonal GAD and collaborating with the Universal Harmony Foundation; in Quito with the Provincial Council of Pichincha (ACF) and the San José Board (DD); in Tulcán with MIES, (ACF); and in Manta with the CCPD (DD and CARE).	There are two different records in the total of agreements reached. The PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary) reports 4 agreements, while the CARE PRM-Q3 Report ECU VF reports 6. Interviews with the technical team, report 6 agreements concluded. Therefore, 100% of the original goal is achieved. The indicator COMPLIES TOTALLY (80% -100% of the goal).

[25] CARE PRM-Q3 Report ECU VF.

[26] PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary)

[27] CARE PRM-Q3 Report ECU VF.

Indicator 4.2	People who receive hygiene kits		
Goal: 942 personas Reach: 1.716 people (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
According to the Financial Report[28] of the PRM Project, the total value of the investment in the hygiene kits was $ 23,183. This represents a cost of $ 13.50 per person for a total of 1716 people from the assisted population. Besides, the use of distribution channels of partners and allies such as local governments (e.g., Municipality of Manta, Provincial Government of Pichincha) allowed increasing the actions' scope.	If the low cost of investment per person is taken into account, compared to the perception of the usefulness of hygiene kits (96% of respondents answered useful and very useful), it is evident that the indicator had a positive cost-utility ratio. Therefore, it shows a HIGH level of efficiency.	The PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary) establishes 1,716 people as the final scope of the indicator, of which 764 are men, 949 women, and 3 are LGBTIQ +; 1,434 Venezuelans and 263 Ecuadorians. It should be noted that said document presents an error in the calculation when defining that 95% of the goal was met, when 180% was met. Meanwhile, when asking about the hygiene kit's usefulness, 96% of the interviewees answered that it was very useful and useful.	By averaging the scope (180%) with the perception of utility (96%) it results in 138% as representation of reach and satisfaction. From the fact that the indicator exceeded the original goal, and that it had a high perception of utility, it is considered that the indicator EXCEEDS COMPLIANCE (beyond the proposed goal).



Indicator 4.3	People who receive multipurpose cash (beneficiaries who received support in accommodation do not receive multipurpose cash).		
Goal: 1.560 people Reach: 1.674 people (CARE, Alas de Colibrí, Diálogo Diverso, 2020)			
Efficiency	**Assessment**	**Effectiveness**	**Assessment**
According to the Financial Report[29] of the PRM Project, the total value of the investment in multipurpose cash was $ 79,441. This gives an average cost of $ 47.50 per person for a total of 1674 people from the assisted population. The ratio of the perception of utility of the people surveyed (96% defined as very useful and useful) on the low amount invested per person attended, gives evidence on that the strategy was cost-effective. The administrative actions for multipurpose cash delivery were agile, especially due to the use of codes at Pichincha Bank ATMs. For the evaluation of the indicator, 50 interviews were conducted with the assisted population. 90% of respondents perceived that the support was delivered quickly (the remaining 10% said it was not).	If the 90% perception of agility in the delivery of aid is taken into account, the indicator had a HIGH level of efficiency.	The PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary) establishes as the goal of the indicator 1,560 beneficiaries, who receive assistance through the delivery of multipurpose cash, with the exception of those who have received support in accommodation. The final scope of the indicator is 1,674 people, of which 756 are men, 904 women, and 14 are LGBTIQ +; 1,502 Venezuelans and 172 Ecuadorians. In addition, the positive perception of utility was that of the majority of recipients. 75% of the respondents found the assistance very useful, while 22% considered it useful and only 3% unhelpful.	If the reach (107%) is averaged with the positive perception of utility (97%), it results in 102% as representation of reach and satisfaction. Hence, the indicator EXCEEDS COMPLIANCE.

[29] Financial Report Agust 20

3.3.- Sustainability

Component 1: Protection, capacity building, and advocacy

The sustainability of the component is evidenced by the fact that most of the people surveyed from the assisted population were not only migrant population in transit but also permanent residents. Therefore, the benefits of the assistance went to people who are developing their life projects in Ecuador. For example, 81% of the people surveyed regarding their level of integration (indicator 1.5) have resided in the country for a year or more.

The PRM Project provided psychosocial and legal assistance to 14,446 people from the affected population (CARE, Alas de Colibrí, Diálogo Diverso, 2020), facilitating their integration processes. Assistance in migration regularization processes, as well as psychosocial and emotional assistance, strengthened the life projects of the people served. However, the sustainability of the component in terms of protection is limited by external factors of structural precariousness such as, employment situation, discrimination and xenophobia, social inequality, etc. Of the 122 recipients surveyed to measure their level of integration (indicator 1.5), only 3 have a formal job with a fixed salary and benefits; 60 are independent, autonomous and informal workers; and 59 don't work. Housing conditions are also a limitation, since a high percentage of interviewees live in single-room dwellings with a shared bathroom, which does not guarantee safety.

Table 9. Housing situation (assisted population)

The house you live in has different environments	
No	36
To some extent	17
Yes	66
Unanswered	3
Total	**122**

The house you live in has a separate bathroom	
No	30
Yes	89
Unanswered	3
Total	**122**

Sustainability is also evidenced in the strengthening of the knowledge of officials and authorities on issues of protection and enforceability of rights and protection routes, among other issues. 140 people, especially public officials, were surveyed to measure capacity building processes (indicator 1.1). When asked if they had acquired new knowledge on protection issues, the majority answered affirmatively, highlighting learnings on the effective application of rights.

Table 10. Acquisition of new knowledge (authorities)

On the issue of protecting migrant populations, learned something new	
No	11%
Yes	81%
Unanswered	8%
Total	**100%**

Table 11. Explanation of the subject learned (authorities)

If you answered "yes" to the previous question, please specify what you learned that you did not know before	
Rights	38%
Protection routes	17%
Vulnerability factors	8%
Migration	15%
Other	13%
Sex-gender	9%
Total	**100%**

Table 12. Practical application of learned knowledge (authorities)

From what you learned during training sessions, what actions did you implement in your work for the protection of migrants	
Legal assistance	8
Social assistance	5
Communication strategies	6
Operational capacities	4
Protection routes	7
Does not answered	10
Total	**40**

Likewise, 33 surveyed applied the new knowledge in their work with the LGBTIQ+ community and women survivors of GBV or human trafficking, as follows: greater knowledge of the rights of vulnerable populations, 18%; use of inclusive language, 12%; support for the impact population with technical advice, 15%; management of a gender approach, 9%; others, 15%.

Regarding advocacy, sustainability is evident in the municipal ordinances discussed, presented, and approved, as well as in spaces for inter-institutional coordination for national advocacy described in the analysis of the component's efficiency and effectiveness. These actions allow the institutions to have the guidelines for the care, reparation, and restitution of violence survivors' rights.

Component 2: Comprehensive health care

The most relevant sustainability factor for this component was the referral to the National Health System - SNS, of cases that required continuous or specialized care. The project assisted most of the cases directly, which expedited care. Nonetheless, the referral of more complex cases was one of the technical team's strengths, as it reflected a high level of coordination with actors such as health centers in the different localities, especially during the COVID-19 crisis.

Table 13. Referral of care (population of impact)

Your case was referred to another institution or organization	
No	152
Yes	20
Total	**172**

However, this component's sustainability is limited if one considers that one of the fundamentals of health care is to achieve lasting changes in attitudes and practices to avoid more complex pathologies in the future. Due to the emergency focus of the PRM Project, the activities of the component focused on specific areas of sexual and reproductive health, as well as on prevention and awareness processes. However, the durability of primary health care and SRH is measured by the participants' sustained access to these SNS services.

Another element to assess is the capacities installed in the migrant population and in the host communities that attended awareness workshops to learn about their rights, especially concerning sexual and reproductive health. Although the project did not contemplate a study to measure changes, behaviors, attitudes, and practices, it can be deduced that these spaces allow empowerment from access to information and to demand the fulfillment of their rights.

Component 3: Accommodation and shelter

Sustainability is reflected in the installed capacity of the shelters in terms of equipment and capacity building. The adaptations made allow responding to the assisted population's needs, plus in safe spaces and with adequate infrastructure.

Adaptations made to shelters

Tulcán Manos Unidas Shelter (Photos taken by the shelter's staff)

Cell adequations for gas tanks

Silkscreen printing octopus machine

Video Surveillance System

Lago Agrio Caritas Shelter
(photos taken by Kelly Jordán, shelter coordinator)

Adequations made in the common room

Rooms entrance doors reinforcement

Manta JUBASCA Shelter
(Photos taken by Freddy Lima, Octaedro Foundation)

Kitchen adequations

Lockers for residents

Playing room

Study room adequations

Divan-bed

Component 4: Humanitarian assistance due to COVID-19 crisis

Sustainability is evidenced in the experience it left for the consortium in managing humanitarian assistance at the organizational level (for the organizations that implemented the project). The technical, administrative, and managerial procedures adapted by the COVID-19 crisis are an important knowledge base for the technical team and partner institutions and organizations. This process made it possible to reach a significant number of people in need whose situation was aggravated by the effects of the COVID-19 pandemic.

3.4.- Global Indicators CARE International

The document "CARE Programmatic Strategy 2020: Indicators to measure results and changes" proposes three main roles for the organization: humanitarian action, promoting lasting change and innovative solutions, and multiplying the scope, with three crosscutting approaches: gender equality and women's voice, inclusive governance and resilience.

The proposed indicators allow harmonizing the information gathering processes around the world, with the purpose of "having a common set of indicators and metrics that guide and are applicable to CARE projects and programs worldwide," and in this way have consolidated results and consistent data for scope analysis. These indicators, created based on the SDGs, are used below to identify the PRM Project's scope in the areas where they are applicable.

Indicator 1

Number of people who obtained adequate emergency shelters and/or accessed adequate housing.

In the summary of beneficiaries by indicator[30] , 1,000 beneficiaries is defined as a target. 1,345 were served: 588 men, 736 women, 21 LGBTIQ+; 1,250 Venezuelans and 95 Ecuadorians. This means that 135% of coverage was achieved.

Of the people surveyed (50 beneficiaries, ~ 5% of the user goal), all reported receiving financial assistance for rent; 38 defined the aid as very useful, 12 as useful, and 1 as not very useful; 45 indicated that the aid lasted from one to two months and 2 less than a month. This shows that the assistance provided momentary relief to the beneficiaries. Besides, it was projected that 250 beneficiaries have access to temporary shelters and protection spaces. The final coverage of the indicator was 203 people (81% of the projected goal): 52 men and 121 women; 126 Venezuelans and 47 Ecuadorians.

The project achieved the effective strengthening of five shelters. It improved their conditions to provide access to safe and dignified spaces for the beneficiaries through a coordinated intervention at Casa de Protección Nido ACF (Quito), Manos Unidas Tejiendo Progreso, Centro de Vivienda Temporal Purik Huasi (Tulcán), Juan Bautista Scalabrini Foundation (JUBASCA), and Casa del Migrante Buen Samaritano (Lago Agrio).

Indicator 2

Percentage of people who obtained adequate amounts of quality food and/or adopted adequate nutritional practices.

The project did not include a specific food and/or nutrition component. However, from the information collected in indicator 4.3, it is evidenced that multipurpose monetary aid allowed 45% of respondents to meet food needs.

Indicator 3

Percentage of people who have access to at least one sexual and reproductive health service (especially women of reproductive age and adolescent girls).

30 PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary).

In the document PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary), 5,000 beneficiaries are defined as the project's goal, with a final coverage of 4,574: 1,725 men, 2,790 women, 59 LGBTIQ+; 2,797 Venezuelans, and 1,777 Ecuadorian. The beneficiaries had access to screenings, pregnancy tests, HIV tests, lubricants and condoms, and information and awareness processes in SH and RH. 168 beneficiaries of this component were surveyed: 37.58% perceived that the care allowed them to solve their need, while 86.72% perceived that the information they received was useful or very useful.

Indicador 4

Percentage of people affected by crises/disasters in CARE response areas, who reported being satisfied with the relevance, timeliness, and accountability of humanitarian interventions.

The PRM Beneficiaries Summary document Sept 2019-Aug 2020 (preliminary) establishes 1,716 people as the final scope of the indicator for the delivery of cleaning kits, of which 764 are men, 949 women, and 3 are LGBTIQ+; 1,448 Venezuelans and 268 Ecuadorians. Of the 50 people interviewed, 80% rated the help as very useful.

Additionally, the delivery of multipurpose cash reached 1,674 people, of which 756 are men, 904 women, and 14 LGBTIQ+; 1502 Venezuelans and 172 Ecuadorians. 80 people were interviewed; 75% rated the help as very useful, and 22% useful. 90% of the respondents considered that the delivery of the aid was agile.

Indicador 5

Demand for modern contraceptives among women aged 15-49 years satisfied.

To evaluate indicator 2.3 of the project, 168 people were interviewed, of which 125 were women. Of these, 122 were in the range of 18 to 49 years, and 56 had access to contraceptives thanks to the PRM Project's actions.

Indicator 6

Number of new or modified policies, laws, public programs, and/or budgets that respond to the rights, needs, and demands of people of all genders.

Compliance with the indicator is evidenced in the approval of cantonal ordinances: in the border municipality of Lago Agrio, to set in force the "Cantonal System for the Prevention, Comprehensive Care and Eradication of Violence against Women, Girls, Adolescents, Youth, Adults, Older Adults, in all its Diversities;" in Portoviejo, the ordinance "For the Inclusion, Recognition, Dissemination, and Respect of Sexual Sexual Diversity-generic;" and in Quito the proposed ordinance of "Prevention of Trafficking and Comprehensive Attention of Victims." At the national level, the three organizations actively participated in an advocacy table that proposed changes to the reform proposal to the Organic Law on Human Mobility prepared by the Sovereignty, Integration, International Relations, and Integral Security Commission of Ecuador's National Assembly.

The PRM project contributed to 6 indicators established by CARE International to measure changes and results within the framework of the CARE 2020 Programmatic Strategy, in the areas of: emergency shelter, food, sexual and reproductive health services, including contraception, satisfaction regarding humanitarian intervention and public policy to guarantee the rights of people of all genders.

4. Communication assessment

Organizational communication and edu-communication were transversal to the execution of the PRM Project's components, whose objectives were framed in the dissemination of actions to target audiences and diverse audiences.

As a result of the COVID-19 pandemic, the emergency communication plan was updated within the framework of health restrictions and structured around social networks as the main dissemination and information channel. Its objectives were[31] : to disseminate the attention services of the PRM Project by telephone and virtual, sensitize the population for the prevention of COVID-19, through key messages on processes related to the thematic areas of attention of the PRM Project and in the context of the health emergency, in addition to providing wide-ranging spaces and events to make visible the challenges faced by the forced-to-migrate population in the context of the emergency.

4.1.- Analysis of the fulfillment of objective 1

> ***Objective 1:*** *Make donors, strategic allies, and direct participants aware of the activities carried out and the goals and indicators achieved.*

Communication with donors and strategic allies took place through social networks, newsletters, and technical progress reports. In every publication on social networks (Facebook, Instagram, Twitter), the United States Office of Population, Refugee, and Migration was tagged, and so was the United States Embassy in Ecuador, and the project executing organizations: CARE Ecuador, Diálogo Diverso, and Alas de Colibrí Foundation. Three virtual newsletters were produced (February, April, and July 2020), which were promoted on social networks and sent by mass email to the Consortium's key contact lists. The PRM project was reported by the news media 64 times, in print, radio, television, and digital media, such as La Hora, El Comercio, Teleamazonas, El Telégrafo, Plan V, Pichincha Universal, among others[32] .

31 Communication commission report: Final report. August 2020.

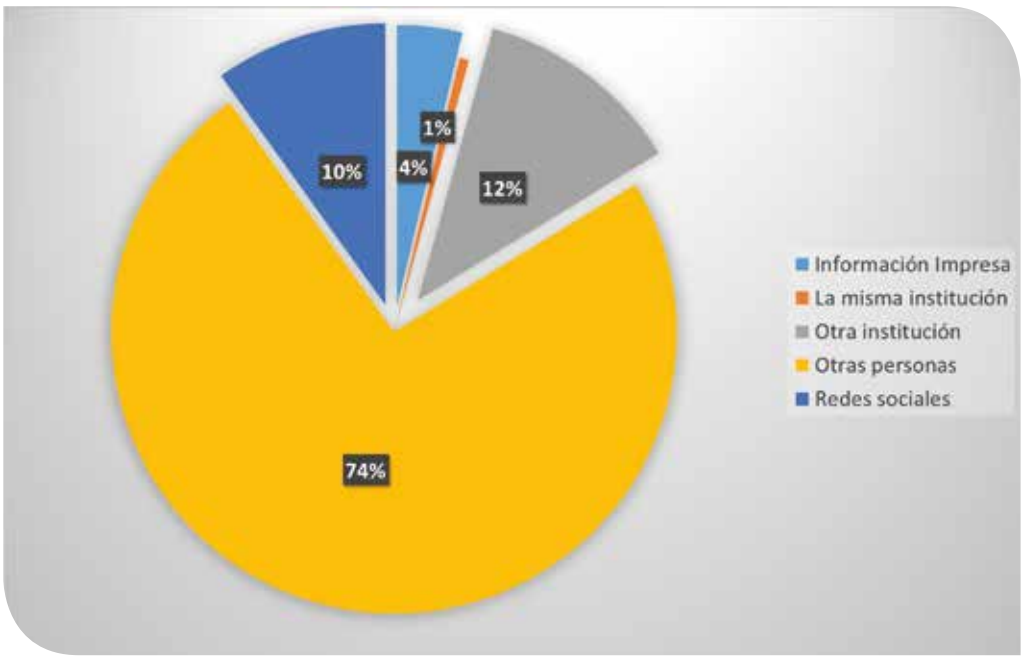
32 Communication commission report: Final report. August 2020.

Newsletter Covers

The publications of the PRM Project had relevance and visible use because they helped to disseminate the scope of the activities and achievements of the project. Regarding its effectiveness, the project achieved coverage of events and positioning of its coordinators as expert spokespersons on migration, trafficking, rights, and diversity. Regarding its efficiency, although the reports do not present the monetized assessment of the project's coverage in the media, it is estimated that due to its general characteristics, it would have a commercial value between $70,000 and $80,000[34] .

Regarding the communication channels with the beneficiaries, the survey of 941 recipients indicates that for a majority (74%), the first source of information about the PRM project was other people, including the participants who promoted the project activities using the "word of mouth" strategy.

Graph 2: Information channels about the project

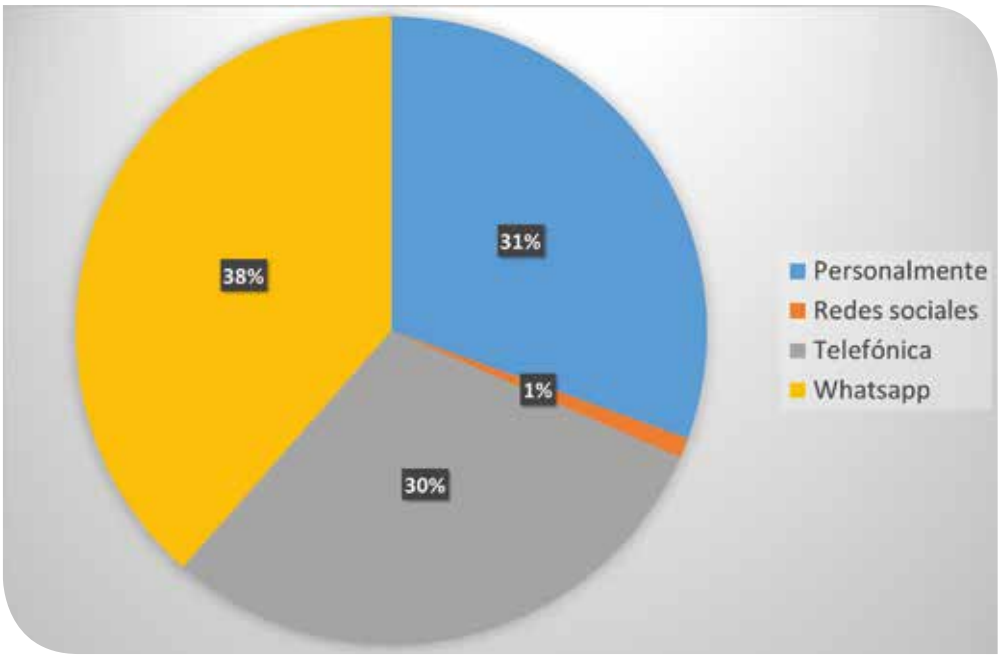


Source: Ex-post evaluation. Prepared by: Octahedron

34 The estimation is made based on airtime, time slot, media, day, and audience.

During the PRM Project implementation, most of the participants maintained personal and telephone communication with the project staff. As a result of the health emergency, they also communicated via WhatsApp and other virtual channels (Graph 3).

Graph 3. Communication channels with the project (beneficiaries)



Source: Ex-post evaluation. Elaboration: Octaedro

These results indicate that the best positioning and information strategy was the management of the PRM Project itself and that the adaptations implemented during the health emergency made it possible to maintain the flow of information with key actors and the positioning of its image.

4.2.- Analysis of the fulfillment of objective 2

> ***Objetivo 2:*** *Carry out communicative actions and produce communication pieces and messages to support political advocacy at the national and local level by motivating inter-institutional and inter-sectorial coordination in response to the humanitarian crisis.*

Informational videos from the PRM Project talk about migration and rights, gender and diversities, and prevention of COVID-19. The videos based on testimonies and activities of the PRM Project account the experience of migrants and refugees, who, in their own voices, recount their stories and the services they have received. The messages related to the project's approaches are simple and understandable for heterogeneous audiences and make it possible to sensitize different audiences. Likewise, they seek to position inclusive discourses in a non-confrontational way, with expressions such as "Migration is a right," "Equal in Dignity, Equal in Rights," "Pride of being yourself."

Likewise, the project produced campaigns and edu-communication material to report the findings of the evidence-based studies that were developed within the project, for example, analysis of human rights, the situation of livelihoods in Quito, among others. The communicational materials also included art as a means of transmitting messages, for example, a "Fanzine" was designed with the participation of several national and foreign artists aiming to sensitize the public on issues of migration.

In the adaptation required by the COVID-19 crisis, the PRM Project disseminated infographics and videos through social networks with messages on the rights of people in a force-to-migrate situation and information about migratory regularization, rights in sexual and reproductive health, violence based on gender, trafficking and sex-gender diversity. The information was sought to be flowing continuously, taking advantage of the effectiveness of this communication channel.

4.3.- Analysis of the achievement of objective 3

> ***Objetivo 3:*** *Inform the Venezuelan population about their rights as applicants for refuge and asylum, and migrants about where and how to access health services, education, protection, how to regularize their migratory situation and where to report if they have been victims of discrimination or gender-based violence.*

The PRM Project disseminated information with two goals: 1) sensitization and empowerment of audiences and 2) information on the provision of the project's services, through infographics and videos produced by each organization, jointly or independently.

When the beneficiaries were asked if they know of the PRM Project services additional to those received, 50% answered yes, 36% no, and 14% partially. For most of the beneficiaries surveyed (90%), the technical teams handled clear information, 7% said it was unclear and 3% confusing.

Regarding the final reach of the messages on social networks, it is estimated that 2,189,609 people[35] was reached. ACF reports 168,170 people (7.7%), DD 921,404 (42%), and CARE 1,099,495 people (50.3%).

4.4.- Analysis of achievement of objective 4

> ***Objetivo 4:*** *Support educational activities with pieces and communication messages on the issues that the project must address, for example, sexual and reproductive health, prevention of gender violence, and prevention of xenophobia.*

The PRM Project produced edu-communication material in printed and digital formats on sexual health and reproductive health, rights of the LGTBIQ+ population, prevention of human trafficking and smuggling, sex-gender diversity and requirements for the VERHU humanitarian visa. The Project also produced messages for dissemination on social networks about prevention of violence, discrimination and xenophobia.

35 The estimation is made based on the information presented in the National ACF Social Media Impact Report of August 20, the DD Social Media Impact March (August 2020), and the CARE Communication Report from 03-16 to 08-16-2020.

According to the document PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary), 3,722 people were trained in rights, protection routes, vulnerability factors, human mobility, and sex-gender diversity.

The surveyed beneficiaries who received assistance from sexual and reproductive health support services (indicator 2.3) were asked what messages they remembered from the information received by the PRM Project. The majority (50 of 77) answered that they did not remember any. The remaining 27 recalled messages on care (10), health prevention (6), sexual and reproductive health (7), and protection resources (4), so it is possible to deduce that there were limits in the process of sensitization with the beneficiaries.

4.5- Analysis of achievement of objective 5

> ***Objetivo 5:*** *Promote spaces for socialization among the Ecuadorian and Venezuelan population to facilitate greater knowledge about the culture and identity of each territory: "Think of myself and the other, respecting our rights."*

To achieve this objective, the PRM Project focused, above all, on the organization of forums held virtually at the beginning of the COVID-19 health emergency given the mobility restrictions[36] . The following were the forums held:

- "Venezuelan Migration and human rights in the face of COVID-19" (May 21, 2020)[37]
- "The rights of refugees: an unknown reality and *Refugiarte Fanzine*" (June 23, 2020)[38]
- "Building joint strategies to mitigate Human Trafficking in times of pandemic and post-pandemic" (July 30, 2020)[39]
- "First International Digital Meeting of Members, Views of Refugees and Migrants" (August 13, 2020)[40]

Due to the flow of Venezuelan migrant population in Ecuador and the limited knowledge of the related effects of this migratory process, it is considered that the spaces for reflection were relevant, just as the digital communication actions were efficient due to their wide dissemination. The project also demonstrated its ability to mobilize by including national and international figures as panelists. As an example of the scope of the PRM Project's awareness-raising activities, 592 people participated in the "First International Digital Meeting for Members, Perspective of Refugees and Migrants."[41]

4.6.- Analysis of achievement of objective 6

> ***Objetivo 6:*** *Crear espacios de reflexión sobre la identidad GLBTI+ y la responsabilidad de las otras personas de respetarlos.*

36 Report of the Communication Commission: Final Report. August 2020.
37 Forum link: https://bit.ly/3ljdsOs
38 Forum link: https://bit.ly/3ji0ui9 Link del Fanzine: https://bit.ly/2E6R1uA
39 Forum link: https://bit.ly/2YwlHga
40 Music video link: https://bit.ly/2QkEIOa and meeting link: https://bit.ly/32qfbc8
41 Data from Report of the Communication Commission: Final report. August 2020.

To achieve this objective, the PRM Project developed the following activities [42] :

- *"De-construction of romantic love" (CARE)*, through workshops and massive events in Huaquillas and Manta.
- *"Take and Give, with love and without fear"* (DD), in LGBTIQ+ nightclubs in Quito, Guayaquil, and Manta.
- *Cineforo "Happily Ever After" (DD), presentation of documentary and debate* on the violations suffered by LGBTIQ+ people.
- *Integration event for International Women's Day* (March 8, 2020, ACF), commemorative campaign on social networks and delivery of identity products in Quito.
- *Artistic Performance against gender-based violence* (CARE), presented in Machala.
- *Diverse Pride 2020 (June 28, 2020)* [43] *and Digital Drag Face Contest* (DD), events that were broadcast on social networks.

These activities sought to raise awareness about the approaches of the PRM Project, strengthen its messages and disseminate its services. In adaptation to the limitations due to the health emergency, they were carried out virtually, which expanded access efficiently. The effectiveness of dissemination of the event "Diverse Pride 2020[44] " is emphasized based on the audience scope informed in the "Report of the Communication Commission: Final Report. August 2020": 48,172 people; 13,953 interactions; 1,916 comments; 271 shares; 22,000 views.

42 Report of the Communication Commission: Final report. August 2020.
43 Diverse Pride Link 2020: http://bit.ly/OrgulloDiverso2020. Drag Face Contest Link 2020: https://bit.ly/2Epijgm y https://bit.ly/3lkzxMk.
44 Data from Report of the Communication Commission: Final report. August 2020.

5. Conclusions, lessons learned, and recommendations

The PRM Project was a comprehensive initiative that included the protection, comprehensive health, accommodation, and humanitarian assistance sectors, in response to the emergency due to the high flow of Venezuelan migration.

Next, we present the conclusions, lessons learned, and recommendations left by this ex-post evaluation and organized based on the evaluation criteria.

CONCLUSIONS

The project's actions are considered pertinent within the context in which they were executed and oriented to the needs of the assisted population and the target population.

Relevance

- The project was relevant because it was able to respond and adapt to the context's needs, which was affected by external situations such as unemployment, social mobilizations in October 2019, and the health crisis caused by COVID 19. The strategies implemented and adapted were possible thanks to the expertise and complementarity of the organizations that made up the consortium. These characteristics have made it possible to respond to the needs of the Venezuelan migrant and refugee population and host communities in vulnerable situations in an agile and adequate manner.

- The project was deliberately designed to guarantee complementary and comprehensive care. This means that a person could access one or more services depending on their degree of vulnerability, which allowed for an adequate case management approach.

- The crisis caused by COVID-19 forced us to rethought the way to deliver humanitarian assistance. However, the consortium quickly adapted and implemented a virtual assistance modality that made it possible to serve people in compliance with international standards and principles of humanitarian assistance. Considering the serious impact this crisis had on the migrant, and refugee population, to which no resources were directed from the State, the consortium (mainly from CARE) decided to intervene in a new town (Ibarra), reallocating economic resources from the project and complementing them with other funds.

- In general, the project responded to the immediate needs of the Venezuelan migrant and refugee population (86% of people served) and the host community (9% of people served). The beneficiaries had to meet vulnerability criteria that allowed emphasizing the attention of survivors of gender-based violence and diverse sex-gender populations.

- The actions of direct attention to the Venezuelan migrant and refugee population and host communities in vulnerable situations were carried out in strict compliance with the standard operating procedures established from the beginning of the project by the Consortium.

- *The protection, strengthening, and advocacy component* pointed toward direct care for the affected population through legal guidance and psychosocial support. The first modality of care was relevant because it allowed the participants to be guided on the migration regularization processes, in response to the demands of the Ecuadorian government, which created an amnesty, registration, and regularization mechanism, to which only 4.5% of the population Venezuelan has been able to access. Psychosocial care allowed providing the necessary emotional support to cope with violations of rights that the Venezuelan migrant and refugee population faces.

- The main objective of both lines of action was to achieve orderly integration between the migrant and refugee population and host communities. Although surveys were implemented to demonstrate integration processes, these do not necessarily respond to this category's methodological concept. However, the participants' responses suggest that the care received has allowed them to join the host community with greater integration tools.

- Regarding the strengthening of capacities of public officials, civil society organizations, and humanitarian personnel, the project responded to the need to increase skills and knowledge in protection issues to guarantee migrant and refugee population's rights. The methodologies and mechanisms used for this purpose were diverse: bi-lateral meetings with local authorities, face-to-face training sessions, virtual courses on CARE's Moodle platform aimed at humanitarian personnel, and accompanying the formulation of local public policies that guide actions in support of the target population.

- *The component of comprehensive health care* was relevant since it allowed complementing the public health system's services. Although the Ecuadorian state guarantees all people's health regardless of their immigration status, amid the economic crisis and that caused by COVID-19, the system collapsed, and it did not have supplies and medicines for specific diseases. Therefore, the project complemented the actions in close coordination with the public health system to guarantee that users can continue accessing the health system.

- The emphasis on sexual and reproductive health has been well received by the migrant and refugee population and those in the host community who were served. Though this health sector is an essential issue for the forced-to-migrate population, it is seldom prioritized; e.g., supplies for this specific type of health care were scarce. Therefore, the project assisted the impact population with pregnancy tests, prenatal control, ultrasound, HIV and STI screening, delivery of condoms, lubricants, medications, supplies, and laboratory tests.

- Implementing *the shelter and accommodation component* was relevant in that xenophobic and discriminatory attitudes and practices make it impossible for the migrant and refugee population to have access to housing in decent conditions. The lack of resources forces families to join and rent spaces where they tend to be crowded and whose conditions are precarious and unsafe, mainly for women, children, and girls. The delivery of accommodation vouchers ensured the population's permanence in their homes until they could find a means of life to guarantee their continuity. In other cases, it allowed women survivors of violence to be in safe spaces (hotels, hostels) away from their perpetrators or people living with HIV to be in safe spaces (rented apartments) while their medical treatment lasted.

- The *humanitarian assistance component* was relevant to respond to the emerging needs of the migrant and refugee population and those of the communities in vulnerable situations amid the COVID 19 crisis. Although this component was not considered from the project design, the adaptation capacity of the project allowed not only to include this care modality (through the delivery of multipurpose cash and hygiene kits for adult women and men, families and babies) but also to implement these actions in Ibarra, where a high number of migrant and refugee population has settled and lives in vulnerable conditions.

Efficiency and effectiveness

The achievements in indicators and activities show that the project was efficient and effective.

- Efficiency translates into the achievement of results, which have been fully met. There are even indicators that exceed the goal by a considerable percentage, partly because the project developed activities that sought integrity in the attention; i.e., the same person could be a beneficiary of different assistance forms. However, the register of participants used by CARE avoids double counting and allows us to visualize that the number of effective beneficiaries exceeds the goal initially set by 23%. This last premise is explained by the efficient use of project resources, which translates into the action's efficiency.

- The project's efficiency is evidenced in the use of its human, technical, and financial resources. The project had qualified personnel for both psychosocial and legal assistance. The activities related to the processes and advocacy were worked on jointly by the technical staff (lawyers, psychologists, and social workers) and the project's strategic staff (coordinators and representatives of the organizations). According to the evaluation, this component's financial resources were destined for humanitarian assistance actions and used to pay for consultancies that made it possible to generate evidence-based studies for advocacy activities.

Sustainability

The sustainability criterion can be explained from the following considerations:

- Based on legal guidance and psychosocial support, direct care contributed to increasing the resilience capacities of the Venezuelan migrant and refugee population, and according to their responses in satisfaction surveys, this support has allowed them to integrate, in a dignified manner, into the host communities. Therefore, sustainability translates into a strengthening of the social fabric of migrants, refugees, and host communities.

- The project's comprehensive care made it possible to serve the participants with direct humanitarian assistance and with awareness workshops in which they learned about their rights and tools so that they can then demand their application.

- The evidence-based studies and analyzes that have been produced within the project are inputs that contribute to improving the processes of care for people force-to-migrate and enable advocacy actions at the local level, through support in the construction of ordinances that seek the protection and restitution of the rights of migrants, refugees, and host communities

- All project actions were carried out in coordination with other humanitarian assistance agencies and institutions that guarantee rights. This allows for generating more comprehensive care but also maintaining such care for migrants and refugees. For example, coordination with the health system allows this population to access these services even after the project's life because they already know their rights. Similarly, the health system personnel has been sensitized to guarantee access to health to the migrant and refugee population after the project's life.

- The adaptation and equipping of shelters and safe spaces is also considered a sustainability strategy since the infrastructure will respond to the needs of the migrant and refugee population even after the project's life.

Lessons learned

Regarding the advocacy processes:

- The advocacy strategy was built jointly in the commission established for this purpose. This allowed for more agile context analysis to ensure that the actions respond to requests for the enforcement of the migrant and refugee population's rights.
- Evidence-based research and knowledge products allowed the generation of inputs to construct public policies, which correspond to local contexts' particular needs and enable the sustainability of actions.
- The consortium organizations' participation in different coordination spaces such as the GTRM group, thematic tables, the Country Humanitarian Team, etc., allows a broader context and articulates actions with other actors to promote advocacy actions, especially locally.
- In the context of the COVID-19 crisis, one of the effective strategies for advocacy was the organization of virtual forums aimed at enforcing the rights of the migrant and refugee population. This strategy was essential to reach decision-makers and the general public with evidence-based inputs, to raise awareness on the importance of fighting xenophobia and discrimination.

Regarding direct assistance:

- Comprehensive assistance allowed the migrant and refugee population to integrate into host communities adequately. However, the needs exceed the consortium's capacities, so the referral of cases to the institutions that guarantee rights ensures the sustainability of timely assistance.
- The different assistance used in this project aimed to alleviate the emerging needs of the most vulnerable population and adapted to the needs of the context. Besides, the collective workshops enabled encounters between the migrant population and the host community to establish integration processes.
- Care, mainly in health, has been the added value of the consortium's actions, especially in the context of the COVID-19 health emergency, which collapsed the health system, and made the needs in sexual and reproductive health neglected.
- The targeting of the vulnerability criteria for the selection of beneficiaries included both the migrant and refugee population and people in vulnerable situations in the host communities, which contributed to reducing discrimination and xenophobia practices and complied with the principle of action without harm.
- The consortium quickly adapted to activate a humanitarian assistance system by virtual means, adapting the new reality generated by the health emergency caused by COVID-19. One of the strategies incorporated was the delivery of multipurpose cash through ATMs without a card but through codes. This intervention will meet the assisted population's pressing needs, such as housing, food, and medicines, and strengthened their resilience and decision-making capacity.

Regarding monitoring and evaluation tools

- The project, at the consortium level, adapted the beneficiary registration system developed by CARE. This is software specifically designed according to the Humanitarian Assistance Program's characteristics and allows the registration and visualization of data, which provides timely information for decision-making.
- The development of Standard Operating Procedures guides the technical implementation of the different components established in the project.
- The disaggregation of the data by sex, gender, and age allows us to have accurate data on care, besides demonstrating the incorporation of the gender approach.
- The satisfaction and follow-up surveys carried out on the participants provide useful information to monitor risks or changes in context and needs.
- The development of monitoring tools within the commission made up of the three organizations of the consortium allows for orderly and precise information on the intervention's scope.

Regarding communication

- The PRM Project used efficient communication channels to inform about the different modalities of attention for the assisted population and report the scope and results of the project periodically to other partners, allies, and donors.
- The communication strategy of the PRM project was focused on organizational communication that allowed the different audiences to be informed of the actions and had communication and educational-communication tools that supported the modalities of direct assistance. The material was adapted to the needs of the target population and the general public to raise awareness.
- The communication strategy was adapted to the changes that occurred due to the COVID-19 emergency.

Recommendations

Regarding advocacy processes:

- It is suggested to consider the project implementation times in the face of those required to achieve advocacy results in the short term. Although the design or approval of public policies was achieved at the local level, the national policies advocacy usually takes a time that exceeds those defined in the project.
- Research products based on evidence must be considered to influence public policy and require a communication strategy for their adequate dissemination. Therefore, the development of actions aimed at this objective is recommended.

Regarding direct assistance:

- It is important to strengthen shelters from a rights perspective, identifying and adapting exclusive spaces for women, the LGBTIQ+ population, and children/adolescents. For this, it is suggested to update the policies and protocols of the free-entry shelters. Likewise, it is considered necessary to create a support network between shelters to share knowledge and organizational resources and strengthen regional attention spaces. The network could promote creating new shelters in areas such as the southern border, where there is a high population flow in a forced-to-migrate situation.
- In addition to the health care areas proposed by the project, a significant number of pathologies reported by members of the project technical team are the result of sustained anemia and malnutrition, especially in children/adolescents in a forced-to-migrate situation. It is considered necessary to expand individual and collective care coverage in basic primary care for this population group.
- It is suggested to develop a specific component of attention in sexual and reproductive health for adolescents, including the protocols used by the Ministry of Public Health. This is due to adolescents' difficulties in accessing these services, which worsened amid the health crisis.

Regarding monitoring and evaluation tools

- Among the reflections collected in this evaluation, there is the question of how the PRM Project should define "integration." The project proposes it as access to services that guarantee rights such as legal advice, knowledge of rights, information for decision-making, and practical actions for integration. However, this measurement requires the development of tools that allow a more precise measurement.

Regarding communication

- The communication strategy should consider the construction of key messages that acknowledge and measure the assisted population's real expectations on the scope of humanitarian assistance.
- The tools used for dissemination lacked monitoring methods that would have made it possible to collect relevant data to know if the messages, channels, and tools were correct. It is recommended that, for each of the channels and tools used, information-gathering methods be included.
- Include impact, result, and process indicators in the communication plan, to allow detailed monitoring.

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ANNEX

Annex 1.- Logical Framework and goals/scope of the PRM Project

The PRM Project proposed as an objective that the Venezuelan forced-to-migrate population, both asylum seekers and migrants, as well as vulnerable Ecuadorian citizens, particularly LGBTIQ+ and women survivors of sexual violence, are better protected, experience better health and physical and psychological well-being, and have access to shelters as a result of assistance interventions in the migrant humanitarian crisis focused on multi-sectorial protection. It established a proportion of 80% of the Venezuelan and migrant population and 20% of the Ecuadorian or host population, with 70% female participants and 30% male participants.

Four specific objectives are derived from the proposal with their respective results, indicators, goals, and reach, described in the following logical framework:

Objective 1.- Strengthen institutional and individual capacities to respond to the protection challenges generated by the humanitarian crisis.

With the following results, indicators, and goals/reach:

Outcome	Indicator	Goal/Reach
1.1 Implementation of mechanisms for protection and regularization by national authorities with international organizations' support and/or protection ordinances by municipalities.	1.1. Number of personnel trained to recognize and respond to security incidents and concerns.	Goal: 3637 personas Reach: 3722 personas (102%)
	1.2 Number of beneficiaries who report protection violations and are referred to, and receive adequate assistance from, psychosocial or legal support services, broken down by sex and age.	Goal: 4800 personas Reach: 14416 personas (300%)
1.2 The Venezuelan forced-to-migrate population, migrants, and refugees receive legal support and protection, emphasizing on the LGBTIQ+ population and women survivors of sexual violence.	1.3 Number of workshops held with local and national authorities as part of the advocacy strategy.	Goal: 48 workshops Reach: 100 (208%)
	1.4 Implementation of at least one formal, extraordinary migration regularization mechanism and/or municipal ordinances by local authorities in the 6 selected municipalities, with the support of international organizations and/or humanitarian actors.	Goal: 6 mechanisms Reach: 5 mechanisms (83%)
	1.5 Number of beneficiaries who report that they can transit and/or integrate with dignity in the host communities.	Goal: 2400 people Reach: 2070 people (86%)

Objective 2.- Provide the target population with comprehensive health information and services that include psychosocial support and sexual and reproductive health with an emphasis on people living with HIV and other sexually transmitted diseases.

With the following results, indicators, and goals/reach:

Outcome	Indicator	Goal/Reach
2.1. Improved mechanisms for primary care and sexual and reproductive health are available and respond to the Venezuelan migrant population's needs.	2.1 Number of beneficiary patients, by sex and age, who receive primary health care assistance, treatments and/or medical supplies.	Goal: 4370 people Reach: 5860 people (134%)
	2.2 Number of beneficiaries referred to the corresponding services.	Goal: 1400 people Reach: 1931 people (138%)
2.2. Psychosocial accompaniment is available for Venezuelan refugees and migrants who can transit and integrate into the host communities dignifiedly.	2.3 Number of beneficiaries receiving assistance from appropriate sexual and reproductive health support services, disaggregated by gender and age.	Goal: 5000 people Reach: 4574 people (91%)
	2.4 Number of workshops to promote sexual and reproductive health rights for migrants and host communities.	Goal: 120 workshops Reach: 145 workshops (121%)

Objective 3.- Provide the target population with expanded and/or improved access to temporary shelters and safe protection spaces.

With the following results, indicators, and goals/reach:

Outcome	Indicator	Goal/Reach
3.1 There are shelters and hostels available in Ibarra and Quito for the forced-to-migrate population (asylum seekers and migrants) and vulnerable Ecuadorian citizens, particularly LGBTIQ and women survivors of sexual violence.	3.1 Number of beneficiary population in the project area that receives shelter assistance (e.g., cash, rehabilitation, etc.), by gender.	Goal: 1000 people Reach: 1345 people (135%)
	3.2 Percentage of people satisfied with the shelter assistance they receive.	Goal: 90 % Reach: 96%
	3.3 Number of beneficiaries who report that they have access to temporary shelters and protection spaces at the project sites.	Goal: 250 people Reach: 203 people (81%)

Objective 4.- Provide emergency assistance to the target population affected by the COVID-19 crisis.

With the following results, indicators, and goals/reach:

Outcome	Goal/Reach
4.1 Agreements with MIES and GAD for the delivery of humanitarian aid and follow-up (establish joint actions).	Goal: 6 agreements Reach: 4 agreements (67%)
4.2 People who receive hygiene kits.	Goal: 942 people Reach: 1716 people (182%)
4.3 People who receive multipurpose cash (users who received support in accommodation do not receive multipurpose cash).	Goal: 1560 people Reach: 1674 people (107%)

Note: Goal 4 was defined and implemented as of the second semester of the project as an urgent response to the crisis due to COVID 19.

Annex 2.- Information gathering tools	
Indicator form 1.1 Trained personnel	https://docs.google.com/forms/d/e/1FAIpQLSfbNcaLP9b9P0UPOy-QmR5QDHV3SMTaVZD2C3q-7JvMKfQcVew/viewform?usp=sf_link
Indicator form 1.1 Trained authorities	https://docs.google.com/forms/d/e/1FAIpQLSfPsBDmLuuJ9q7w3-cG16_6S9GrIhtbqQN4FmYvcJiD49H2Mhg/viewform?usp=sf_link
Indicator form 1.2 Beneficiaries	https://docs.google.com/forms/d/e/1FAIpQLSe5_n_ZpLl-XpyYEpiD-Qo_0YQcfyMaUbDeWmSsNyCxwt5oVkw/viewform?usp=sf_link
Indicator form 1.4 Technical team	https://docs.google.com/forms/d/e/1FAIpQLSf6Y4rXcWD7mxcS21-v8Ex5MGj5o9q9e-Q-KH5YxI8lbEIm1Bg/viewform?usp=sf_link
Indicator form 1.5 Technical team	https://docs.google.com/forms/d/e/1FAIpQLSfFG97B7u4OkOEngzW1-JhjL6Xf-wwjYl0tEhMhulp3zVDD6mA/viewform?usp=sf_link
Indicator form 1.5 Beneficiaries	https://docs.google.com/forms/d/e/1FAIpQLSftRZ63dsbZNUUhjlm-NARgrZdN1YE2_iElzWPkAD-AbwKMy4g/viewform?usp=sf_link
Indicator form 2.1 Technical team	https://docs.google.com/forms/d/e/1FAIpQLSeeptO9wBA-SE7Ebw-f66yv0rUOTeHoowBAQttqmWAWWslSpOg/viewform?usp=sf_link
Indicator form 2.1 Beneficiaries	https://docs.google.com/forms/d/e/1FAIpQLSeBMUrIzPRx5R6qkBuT5-drBA4ZD7svaafQidqrHT0QWVi_Qhw/viewform?usp=sf_link
Indicator form 2.3 Beneficiaries	https://docs.google.com/forms/d/e/1FAIpQLSeFGfWrjZSQ0-q83zWmZZRaQsXZABfWOs0-nkftGJCbvGs3LJw/viewform?usp=sf_link
Indicator form 3.1 Beneficiaries	https://docs.google.com/forms/d/e/1FAIpQLSfV6cvs9rT9PRbT_3c-FwRBpPfONY_xWEJB4iESkVTXA61C63w/viewform?usp=sf_link
Indicator form 3.2 Beneficiaries	https://docs.google.com/forms/d/e/1FAIpQLScfkvaU6NC-fm5-XwZ_z5PTwv7vZZVWycoVT0uifvINzqCVY2w/viewform?usp=sf_link

Authorities form 4.1	https://docs.google.com/forms/d/e/1FAIpQLSetd49Oj5xslapdRAQR-MwM8hSnEBfmF0b4Dp4bnc_A9x20lAA/viewform?usp=sf_link
Beneficiaries form 4.2	https://docs.google.com/forms/d/e/1FAIpQLSfsZMCVqsr_-UW7-dO29axjhVxBEZ2lP8jiTEefz_TzZAMLoGQ/viewform?usp=sf_link
Beneficiaries form 4.3	https://docs.google.com/forms/d/e/1FAIpQLScdiTigHlQcDCUHKoV-jJ2_WyO1Ho9ezgWC66w0Ta0cugt4xPQ/viewform?usp=sf_link
Interview Communication personnel	https://docs.google.com/forms/d/e/1FAIpQLScJ-JIO1hZD0c7hOm2GS-jnqZNFU649r-8OAQjYsQtUFSs0lCQ/viewform?usp=sf_link
Focus group discussion Protection	https://docs.google.com/forms/d/e/1FAIpQLSfiIGXaJ_QeYoV6Skk9-dZzQmbCQhLHLF_gRh6H96nk6rRON_A/viewform?usp=sf_link
Focus group discussion Comprehensive health	https://docs.google.com/forms/d/e/1FAIpQLSfraLbFJWE83fFPpMDAB-QN9KOvM9GXnaxv3ysyDFXh6tF0qzw/viewform?usp=sf_link
Focus group discussion Accommodation and shelter	https://docs.google.com/forms/d/e/1FAIpQLSda8PeRLSq-neYHKwEC-KmlYLCYNyaVHhZDoG2vGfsU9Z8Fb2Q/viewform?usp=sf_link
Focus group discussion Humanitarian assistance	https://docs.google.com/forms/d/e/1FAIpQLScQ-xJA6q2djN56QpjYi-DOt7XCu9zRKjggYGb9LdmKbCNTojQ/viewform?usp=sf_link
Coordinator / representative / team interviews in the territory	https://docs.google.com/forms/d/e/1FAIpQLScEYUKzssI4oOrV-ZcRw-GIILwr2yHKjRQIjfjbFbEEokzlgLg/viewform?usp=sf_link
Interview Institutional coordinator	https://docs.google.com/forms/d/e/1FAIpQLSf3IMiEGgnYJj7yQGTE-HTlhfYqugGLw_ggD928qpQbEtxrAmA/viewform?usp=sf_link
Interview Institutional coordinator	https://docs.google.com/forms/d/e/1FAIpQLSf3IMiEGgnYJj7yQGTE-HTlhfYqugGLw_ggD928qpQbEtxrAmA/viewform?usp=sf_link
Interview Monitoring team	https://docs.google.com/forms/d/e/1FAIpQLSc7JOSRqqwf5ySQYmUXj-FXrXtUeUxlt9TUVv49_1Czz3qbC5A/viewform?usp=sf_link
Interview Project coordinator	https://docs.google.com/forms/d/e/1FAIpQLSdO1yoXwUh-Q-Hub0tA-JkGUPmHJf3WPApusjilhbjL4q_Cllw/viewform?usp=sf_link
Interview Financial management	https://docs.google.com/forms/d/e/1FAIpQLScPdBQf7YsSbo-7VDhH_-vO1jDtQGolRWeyj8tp2eBO0sknunQ/viewform?usp=sf_link

Annex 3.- Data collection activities by indicator and date

Collection activity	*Participant*	*Date (year 2020)*
Indicator 1.1		
Telephone questionnaire	140 people trained	August 12 to 18
Telephone questionnaire	40 authorities trained	August 22 to September 8
Indicador 1.2		
Telephone questionnaire	254 beneficiaries that received assistance	August 11 to September 8

Collection activity	*Participant*	*Date (year 2020)*
Indicador 1.3		
Documental review	150 records of local and national authorities	August 11 to September 8
Indicador 1.4		
On-line questionnaire	8 project technicians	August 16 to 17
Documental review	Migratory status regularization mechanisms	September 5 to 8
Indicador 1.5		
Telephone questionnaire	120 beneficiaries	August 14 to September 5
Digital or face-to-face visit to shelters	4 shelters	September 21 to 18
On-line questionnaire	17 technical team members	August 16 to 17
Focus group discussion	Beneficiaries component	September 14
Indicador 2.1		
Telephone questionnaire	230 beneficiaries	August 13 to 18
On-line questionnaire	17 technical team members	August 16 to 17
Indicador 2.2		
Documental review	Vouchers and service cards	September 14 to 22
Indicador 2.3		
Telephone questionnaire	178 beneficiaries	August 13 to 18
Focus group discussion	Beneficiaries component	September 14
Indicador 3.1		
Telephone questionnaire	50 beneficiaries	August 13 to 15
Indicadores 3.2 y 3.3		
Interview	12 beneficiaries	September 7
Digital or face-to-face visit to shelters	4 shelters	September 21 to 18
Focus group discussion	Technical team members	September 18
Indicador 4.1		
Authorities interview	7 authorities	September 8 to 12
Indicador 4.2		
Telephone questionnaire	50 hygiene kits beneficiaries	August 15 to 17

Collection activity	*Participant*	*Date (year 2020)*
Indicador 4.3		
Telephone questionnaire	79 multipurpose cash beneficiaries	15 al 17 de agosto
Focus group discussion	Technical team members	18 de septiembre
	Related activities	
On-line questionnaire	3 technical team members in charge of communication actions	17 de agosto
Interview	Project coordinator	16 de septiembre
Interview	Institutional coordinators	14 al 18 de septiembre
Interview	Territorial coordinators	14 al 18 de septiembre

Anexo 4.- Cuadro de revisión documental	
Indicador 1.1	
Documentation	Attendance records, PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary).
Indicador 1.2	
Documentation	Attention tokens, vouchers.
Indicador 1.3	
Documentation	PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary). Matrix of Indicators PRM Sep-Oct 2019. Summary of Beneficiaries According to the Indicator Matrix Sep 2019-Mar 2020. Summary of Beneficiaries According to the Indicator Matrix Sep 2019-Jun 2020.
Indicador 1.3	
Documentation	PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary). Matrix de Indicators PRM Sep-Oct 2019. Summary of Beneficiaries According to the Indicator Matrix Sep 2019-Mar 2020. Summary of Beneficiaries According to the Indicator Matrix Sep 2019-Jun 2020.
Indicador 1.4	
Documentation	Advocacy Report-Quito 1 Reform LOMH. Advocacy Process Report Lago Agrio. Advocacy Process Report PRM Tulcán-ordinance. Advocacy Process Report Quito 2 Anti-Human Trafficking Ordinance. Advocacy Process Report Quito 3 Consulate of Venezuela.
Indicador 1.5	
Documentation	Results of the Project Satisfaction Survey PRM

Indicador 2.1	
Documentation	Matrix of Indicators Budget execution by partner
Indicador 2.2	
Documentation	Matrix of Indicators Budget execution by partner
Indicador 2.3	
Documentation	PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary) Budget execution by partner
Indicador 2.4	
Documentation	Review of attendance records, Budget Execution by Partner
Indicador 3.1	
Documentation	PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary)
Indicador 3.2	
Documentation	Budget execution by partner, photographic record, satisfaction surveys
Indicador 3.3	
Documentation	PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary)
Indicador 4.1	
Documentation	CARE PRM-Q3 Report ECU VF, PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary)
Indicador 4.2	
Documentation	PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary)
Indicador 4.3	
Documentation	PRM Beneficiaries Summary Sept 2019-Aug 2020 (preliminary)
Plan de comunicación	
Documentation	Report of the Communication Commission: Final report. August 2020.

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Todxs LOS LUGARES LAS PERSONAS

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Octaedro Foundation consulting team - 2020

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